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ABSTRACT

This collection of resources contains 34 studies which summarize significant developments within the history of psychoactive substance use in developed countries since the sixteenth century. The primary intent of this volume is to provide a greater awareness of the ubiquity of drug use in the past and of the complex and varied factors which have influenced its spread, society's response to the spread, and the effects of that response. The studies review drug use since the Renaissance in the United States, Europe, and Asia with an emphasis on the following substances: alcohol, coffee, tobacco, ether, cocaine, amphetamine, marihuana, opium, and the opiates. Each section includes an introductory review, chronology and summaries of previous research. (Author/HLM)

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PERSPECTIVES ON THE HISTORY OF PSYCHOACTIVE SUBSTANCE USE

Gregory A. Austin, Ph. D.
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U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
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Foreword

The issues of psychosocial drug use and abuse have generated many volumes analyzing the "problem" and suggesting "solutions." Research has been conducted in many disciplines and from many different points of view. The need to bring together and make accessible the results of these research investigations is becoming increasingly important. The Research Issues Series is intended to aid investigators by collecting, summarizing, and disseminating this large and disparate body of literature. The focus of this series is on critical problems in the field. The topic of each volume is chosen because it represents a challenging issue of current interest to the research community. As additional issues are identified, relevant research will be published as part of the series.

Many of the volumes in the series are reference summaries of major empirical research and theoretical studies of the last fifteen years. These summaries are compiled to provide the reader with the purpose, methodology, findings, and conclusions of the studies in given topic areas. Other volumes are original resource handbooks designed to assist drug researchers. These resource works vary considerably in their topics and contents, but each addresses virtually unexplored areas which have received little attention from the research world.

Dan J. Lettieri, Ph.D.
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Preface

This volume contains 34 separate studies--or "perspectives" as we refer to them--which individually summarize significant developments within the history of psychoactive substance use in developed countries since the sixteenth century. Conceived by Drs. Dan Lettieri and William Pollin at the National Institute of Drug Abuse, the primary intent of the volume is to provide a greater awareness of the ubiquity of drug use in the past and of the complex and varied factors which have influenced its spread and society's response, as well as the effects of that response.

The perspectives themselves cover a wide range of countries, eras, and drugs. The substances discussed are tobacco, coffee, alcohol, cannabis, cocaine, opium, and the opiates. Each perspective was, therefore, designed to be a coherent entity in itself, although there are many cross references between perspectives. In addition, in the Introduction I have sought to tie together some of the major themes, trends, and issues that run across topics and drug history in general. The Introduction also provides a further discussion of the scope and purpose of this volume.

All the topics were selected because of their individual importance as well as because they helped to promote a well-rounded understanding of the history of drug use. Special attention was directed toward critical areas about which common knowledge is most limited -such as the history of tobacco use. Budget and time limitations controlled the actual number of perspectives which we were finally able to prepare. Inevitably--and regrettably--many significant topics had to be omitted. The scope of the project also unfortunately necessitated a heavy reliance on secondary authorities. It was impossible to examine thoroughly all the information in both the primary and secondary literature. Primary research of higher quality is still much needed, for one of the major drawbacks of previous writings about drug history has often been an uncritical reliance on secondary "authorities." But because so many people are so unfamiliar with the history of substance use, it was felt important to first summarize in an easily accessible fashion the general state of our present knowledge.

In order to help insure that each topic was covered adequately and accurately, each perspective was sent out to one or more subject experts for review and comment. A list of these reviewers is included below. Their thoughtful suggestions and criticisms were invaluable in helping to focus on the most salient information and, even more importantly, in helping to avoid perpetuating past misconceptions and errors. Gratefully, I thank them and acknowledge their contributions. Any errors which remain are, of course, my own responsibility. I welcome comments.

In addition to these reviewers, a number of staff members at Documentation Associates also provided substantive assistance. Credit for compiling much of the preliminary material is due to Gaye Hoffman, Marianne Moerman, and Mary Macari.

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June 1978

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ABBREVIATIONS

Int. J. Add.	International Journal of the Addictions
Trans. Asiatic Soc. Japan	Transactions of the Asiatic Society of Japan
JAMA	Journal of the American Medical Association
Q.J. Stud. Alc.	Quarterly Journal of Studies on Alcohol
Brit. J. Add.	British Journal of the Addictions
Bull. Narc.	Bulletin of Narcotics
Bull. Hist. Med.	Bulletin on the History of Medicine
Am. J. Pharm.	American Journal of Pharmacology
Marihuana: Signal	National Commission on Marihuana and Drug Abuse, Marihuana: A Signal of Misunderstanding
Drug Use in America	National Commission on Marihuana and Drug Abuse, Drug Use in America: Problem in Perspective
Fed. Prob.	Federal Probation
John Marshall J. Pract. and Proc.	John Marshall Journal of Practice and Procedures
National Commission	National Commission on Marihuana and Drug Abuse (U.S.)

Introduction

PURPOSE AND RATIONALE

In our efforts to develop a more rational approach toward drug use, an historical perspective is critically needed. Many Americans view the contemporary drug situation as a unique problem unlike any experienced before; in fact, the use of drugs or psychoactive substances seems to be an almost universal phenomenon which has long been a complex, often highly volatile social concern.[1] An estimated 4,000 plants yield psychoactive substances, and about 60 of these drugs have been in constant use, somewhere in the world, throughout history--with cannabis, opium, coca, tea, coffee, tobacco, and alcohol predominating.[2] Certainly individuals have abstained from the use of all drugs, but the ubiquity of use is so striking it is difficult not to concur with Andrew Weil that "it must represent a basic human appetite."[3] Unfortunately, our understanding of this phenomenon, and how to deal with it effectively, is at best still severely limited. This ignorance is partly due to our failure to explore fully the experiences of different times and places. This volume was designed as a preliminary step in the effort to acquire and disseminate more knowledge about these experiences.

The term "perspective" means the capacity to view things in their true relationship or importance. As such, the title of this work reflects the hope that it will contribute significantly to a more realistic view of the dynamics of drug use through the study of the past. Our present knowledge about past drug use is not merely inadequate; it is also filled with inaccuracies and misconceptions. Too often we have been too uncritical in the handling of "historical" data, relying heavily on unsubstantiated secondary "authorities" and employing the sanction of historical "truth" to support polemical arguments. This misuse of history has contributed significantly to the confusions surrounding this controversial subject. But when conducted properly, history can help to clear up these same confusions in ways unavailable through other disciplines.[4]

By allowing the experiences of the past to inform the present, and by clarifying the relationship between the two, history can greatly expand our knowledge of some of the most fundamental issues surrounding substance use. Drug-using behavior and the responses it elicits are dynamic, multifaceted phenomena which are constantly changing and which cannot be understood apart from the sociocultural and historical contexts in which they occur.[5] Any etiological theory must account for the diversities as well as the similarities that occur in drug use patterns in different places and times. The study of drug history can also help us distinguish between the direct pharmacological effects of a substance and those external factors which influence an individual's experience with a drug, the spread of its use, and society's response. It can help identify which changes in a society effect changes in drug use, which populations are most susceptible to the attraction of certain substances and under what conditions, why certain drugs have affected different societies in different ways, why drug use spreads to certain locations and not others, why its use waxes and wanes, which characteristics of a society have moderated or aggravated the disruptive potential of drug-using behaviors, and how drug use has been affected by past social responses, public policies, and laws. As Barry emphasizes, the comparison of different time periods in the same society approximates the powerful experimental method of measuring the effect of change in one condition while holding all other conditions constant.[6] Possibly most important, history can provide a critical test for our concepts of reality and the assumptions upon which our present attitudes and policies toward drug use are based. Too often we erroneously accept these assumptions as universal truths when in fact they are conditioned by custom and tradition.

The title of the volume also reflects the fact that it is intended only as an introductory reader--not a complete, coherent narrative of the entire history of drug use, but rather a compilation of 34 studies, or "perspectives," which summarize different developments within that history and provide illustrations of the diversity of drug use as well as the similar patterns that have occurred. The focus is modern, secular, recreational use of psychoactive substances--that is, the use of chemical substances which have the capacity to cause psychological or behavioral change by altering sensation, feeling, mood, perception, or other mental states.[7] The specific substances discussed are tobacco (nicotine), coffee (caffeine), alcohol, cannabis, cocaine, opium, and the opium derivatives. The information included in each perspective was selected on the basis of the insights it contributed to the understanding of the event as a whole and to three principle areas of concern: (1) the spread of substance use; (2) the way societies and governments have responded to that spread; and (3) the effects of public policies. The aim was to summarize in a succinct and easy-to-use fashion the basic, readily available knowledge about each topic. As discussed in the Preface, the perspectives mainly rely on secondary literature. Hopefully, however, this volume will not only inform but also stimulate others to undertake more detailed primary research into these topics and drug history in general.

TERMINOLOGY

The term "psychoactive substance" is emphasized over "drug" because of the popular confusion surrounding exactly what is and is not a drug. Many people simply do not identify as drugs such widely used, licit substances as coffee, tea, alcohol, and tobacco--an arbitrary and inaccurate distinction which has had serious social consequences.[8] Nevertheless, the term "substance" is essentially a synonym for "drug" and both terms are used interchangeably in this volume.

Even more confusion surrounds the distinction between "use" and "abuse." All the perspectives deal with the development of a drug-using situation which became viewed as dangerous or unacceptable, therefore requiring formal, legislative controls. As popularly conceived, in each case the problem might be defined as one of drug "abuse." However, abuse is a highly relative, unstandard concept meaning different things to different peoples.[9] While most will concur that it implies some degree of excessive, dangerous, or unacceptable use, few concur on what that degree is. To many, it is the use of any psychoactive substance, licit or illicit, under any circumstances. To others, it refers only to illicit drugs, or to the use of any drug without professional medical supervision, or for nonmedical purposes. Not only is abuse an unstandard expression, it is also heavily value-laden. It has come to be the current equivalent of "badness"--the use of any drug which is not approved.

One of the purposes of this volume is precisely to promote a better understanding of the fluidity and mutability of our attitudes towards drugs and of the complex process through which at any given time a society comes to differentiate acceptable (conventional) from unacceptable (unconventional) use, or how it comes to label use as abuse. Many of the perspectives (especially those on tobacco and coffee) illustrate concerns over controlling or prohibiting use per se. Others show that distinctions were made between levels of patterns of use. Historically, alcohol has been praised as one of the "Good Creatures of God" when used in moderation; only its evil effects when used in excess were denounced. It was not until the mid-19th century that this distinction became blurred as many attacked any use of "demon rum" as an abuse which had to be prohibited (see persp. 19-21). Attitudes toward opium use underwent a similar change around the turn of the 20th century (see persp. 24-25, 30-32). The perspectives also illustrate that social concerns over "abuse" have not always required that any ill effects from drugs be demonstrated, and that the assessment of the "badness" of drug use often depends less on considerations for individual or social health based on the actual pharmacological effects of a drug than on tangential and arbitrary political, economic, and moral concerns. Particularly in periods of social crisis, substance use often becomes the symbolic focal point for antagonisms between user and nonuser groups which rest, either consciously or unconsciously, in other concerns. On the other hand, the awareness of damaging effects has not always produced either social concern or any conclusion of abuse.[10]

The concept of drug "abuse" has thus been correctly attacked as too polemical and too inclusive to be scientifically useful in trying to understand various degrees of drug use. Many authorities, including the National Commission on Marihuana and Drug Abuse, have emphasized that it should be entirely avoided.[11] In substitution, it has been recommended that only the term "use" should be employed, defining it further by such distinctions as medical vs. nonmedical use, licit vs. illicit use, or conventional vs. unconventional use. It is at least minimally clear that if the term "abuse" is to be employed, the user must explicitly define what he means by it. For all its lack of clarity, however, the concept itself does have utility. The common component of all definitions is the element of societal disapproval:

> Drug abuse is behavior, as designated by professional and other community representatives, describing the use of particular drugs in particular ways for particular reasons which are contrary to the agreed upon rituals in a given community at a given point in time.[12]

Because drug abuse has developed such a clear connotation of danger, evil, or deviancy, it remains an apt word for an attitudinal response which incorporates these judgements. The critical distinction is that the referent of this term is a social attitude and not a clearly defined pattern of use. The word "abuse" is therefore utilized in this volume to reflect that some pattern of use had developed which was judged as unacceptable by a society's policy makers. Indeed, one of the more fruitful areas for historical research is the way in which a concept of "abuse" develops in different times and places.

CHRONOLOGICAL BACKGROUND: THE ORIGINS OF MODERN SUBSTANCE USE

This volume focuses on substance use since the 16th century. Information on previous periods is scanty and unreliable; more importantly, starting around 1500 the incidence of and concern over substance use increases dramatically and there emerges the recognizable outline of a distinctly modern pattern of use. For classical and medieval times it is extremely difficult to draw any definitive conclusions regarding the origins of substance use, popular attitudes, or the extent to which drugs were used as intoxicants. It does appear that the only drug which caused any major social concern was alcohol.[13] Because it is a natural product and fermentation occurs commonly in a number of substances throughout the globe, alcoholic beverages are relatively simple and inexpensive to produce in substantial quantities; undoubtedly the use of beer and berry wines predates recorded history. Alcohol is also the oldest documented compound of abuse. Records discussing its disabling effects and its control date back to Egypt and Mesopotamia, and widespread drinking occurred in early Greece and Rome, prompting considerable efforts to enforce moderation. By the 1st century B.C., alcoholism was recognized in Rome; by the 1st century A.D., the Emperor Domitian had ordered a decrease in viticulture in order to promote temperance and stop the devotion of so much land to grapes rather than food products.[14] After the 1st century, there appears to have been a decline in alcohol use and alcoholism, but in the 4th century A.D., Ammianus Marcellinus describes a penal code requiring that heavy drinkers be led by a cord strung through their noses; persistent offenders were tied with a nose cord in the public square.[15]

The ancient world does not seem to have experienced any other significant drug use problem.[16] Although the early history of cannabis use is extremely vague, it appears that use and cultivation began in China. The first mention of its medicinal properties occurs in the 2nd century B.C., undoubtedly drawing on well-established traditions, but advocated as a sedative and all-purpose medication, it never seems to have been used extensively as a recreational intoxicant.[17] From China, cannabis spread to India and the surrounding Asian countries. In India, use at first was limited to religious purposes; it was not until the 12th century that medicinal use developed. Greek and Latin literature substantiates that certain properties of cannabis were known to the classical Mediterranean world and that it was used for medicinal purposes. Yet except for a few widely quoted fragmentary references, it can not be affirmed that it was used as an intoxicant despite the region's many contacts with cannabis-using cultures in Assyria and Asia minor.[18]

With regard to opium, the evidence suggests it was known by the 15th century B.C. in Egypt and Cyprus but its use in the classical world remained under medical control--and classical physicians advised great caution in prescribing it.[19] While its effects were well known, and it was widely used in all ancient medicine, the phenomena of dependence or abuse were not recorded until the early 17th century.[20]

Beginning in the 16th century, however, psychoactive substance use began to rise, and so did concern over abuse.[21] The reasons for this change have yet to be thoroughly investigated, but the influence of three developments is apparent. First, major sociocultural changes during this period made the Western world more receptive to the adoption of innovative drug use. Life was becoming increasingly urbanized, facilitating the quick spread of drug-using behaviors throughout large populations. It was an age of flux and change as a more secular, modern world emerged from the Middle Ages and previous social and religious controls over behavior were loosened. As Blum points out, cultures which are highly traditional or ritualized do not easily accept innovations without external pressure. The more complex, secular, and free a society, the more likely it also is that more drugs will be used in more ways within it; and the more heterogeneous drug use becomes, the more conflicting evaluations in regard to it multiply.[22] Second, the period's increased exploration and colonization efforts brought contact with new peoples who used new substances (notably tobacco and coffee); in turn, Western explorers, colonists, merchants, travelers, and soldiers carried their use of both old and new substances to the rest of the world. The contemporary controversy over the spread of marihuana use pales in comparison to the rapidity of the spread of tobacco and coffee use and the controversies that resulted. Previously, different drug-using customs of separate peoples were kept intact by geographic isolation and therefore drug use was able to be limited by customary social and religious controls. As the perspectives illustrate, almost all great drug crises have occurred when a new drug was introduced into a society and there were neither familiarity with, nor established social controls over, its use, or when existing controls were disrupted among a particular group. Third, technological developments in alcohol distillation and coffee bean roasting further helped to exacerbate the problem by making these substances more readily available, pleasant to consume, and less expensive. Late medieval advances in distillation made it possible to increase the potency of alcoholic beverages 400-500% (from 14% to 50% or more in alcoholic content); it freed man from dependency on viticulture and the difficulties of transporting wine and beer. By making it easier to get drunk, distillation greatly intensified the problem of alcohol use.[23] As illustrated by the London gin epidemic and the widespread use of spirits in the American West (persp. 14, 20), when cheap spirits were made readily available for the first time under conditions of social dislocation and stress, the results were disastrous.

In short, beginning in the 16th century newer and more potent forms of drugs became available at the same time as general sociocultural conditions were making man more receptive to the adoption of innovations in drug use. The social problems posed by substance use as an aggregate consequently assumed a greater importance than in any previous time. The perspectives detail some of the specific factors which have influenced the continued spread of drug use since the 16th century, but what is apparent is that this period represents the critical dividing line in the history of man's substance use.

FORMAT

Each perspective is divided into four sections: (1) BACKGROUND, an introductory section which reviews major points of interest and provides an overview to the topic; (2) CHRONOLOGY, an annotated and referenced review of some of the most relevant or interesting developments that occurred; COMMENTARIES, or summaries of previous researchers' points of view, interpretations, or conclusions regarding the topic; and (4) REFERENCES, a bibliography with short citations to the sources which were used in preparing each perspective. In addition, a complete bibliography with full citations is included at the end of the volume. In the Commentaries section, direct quotations were included whenever possible. Sometimes, because of length, it was necessary to paraphrase or abstract an author's writings; in such cases, the author's own words were utilized as much as possible, but quotation marks were not employed. The reference notes in each Chronology are keyed to the numbered citations in the References section.

This format was devised in order to highlight significant facts and to try to keep these facts separate from the interpretations and judgments collected in the Commentaries. This should not be viewed as a division between "objective" facts and "subjective" interpretations. The facts of history are never totally objective in themselves; they become facts of history only because of the significance attached to them by the historian, whose goal it is to establish a coherent and rational relationship between available facts and interpretation.[24] It is hoped, however, that this format will facilitate the critical examination of both facts and interpretations.

Each perspective or series of perspectives begins with either the introduction of a new drug into a society or the point when widespread concern over use develops. The perspective then traces the spread of use and the influences of that spread, the development of popular attitudes toward the substance and the social response to its use, the motivations behind legislative enactments, and the effects of these enactments. Generally, each Chronology is continued to the point where some apparent resolution or other significant terminus has been reached. In several cases the history of one country's use of a drug is divided by time over a number of perspectives. The division point between perspectives was selected in a way that gave each perspective a structure and an importance of its own.

Following this introduction are two additional user guides. The SUMMARY CHART provides a graphic representation of the countries, drugs, and time periods covered by the perspectives. The

SYNOPTIC CHRONOLOGY briefly lists, sequentially by date, some of the most significant information included elsewhere in the volume. While there are some entries for the period between classical antiquity and the 15th century, the chronology essentially begins in 1450, with subsequent entries divided into 25 year periods, as in the summary chart. The purpose of this overall chronology is to provide a better idea of the history of psychoactive substance use in general and to tie together the information discussed in the separate perspectives so that it is easier to see similarities, differences, and interrelationships in the use of drugs across time and geographic locations. To facilitate this overview, each chronological heading is subdivided into alphabetical headings for drugs (alcohol, cannabis, cocaine, coffee, ether, opiates, stimulants and tobacco), and then again for countries (Arabia, China, England/Great Britain, Finland, France, India, Ireland, Italy, Jamaica, Japan, Prussia, Russia, Sweden, and the United States). The chronology thus provides access to data by dates, drugs, and countries. By first consulting the summary chart, the reader can further determine even more quickly where in the Synoptic Chronology the information of interest can be found. For example, the use of drugs in the 16th century can be examined by reading all the entries between 1500 and 1600; the history of cannabis use by examining in each chronological period all the entries under "Cannabis"; the use of all drugs in England, by reading all the entries under "England" or "Great Britain."

Although almost all of the information in the Synoptic Chronology was taken from elsewhere in the volume, some additional information was included in order to tie together significant themes and developments or to fill in gaps which exist between perspectives. No attempt was made, to provide comprehensive coverage of drug history; but it is hoped this Chronology will provide a better understanding of overall changes and broader developments than is provided by the narrowly-focused, topical perspectives.

DATA LIMITATIONS

In the analysis of drug history, we are admittedly limited by lack of data and difficulties in interpreting what data are available.[24] This is particularly true for the period before the 16th century. While we may have evidence that a drug was known in a society, we often have no evidence regarding what was known about it, the extent to which it was used, or how and why it was used--whether, for instance, it was for ritual, medicinal, or recreational purposes. We may also know that a law was enacted putting restrictions on use, but not why it was passed, what effects were intended, and what effects it had. Following the 16th century there is more data available, but the gaps in our knowledge and the problems of interpretation remain. We often do not have precise data as to how a law was enforced, how it affected users, and what factors contributed to its success or failure. Much of our knowledge about rises and declines in consumption must be interpreted indirectly from government data on tax revenues, imports, or production; we have little data on the extent to which illicit use continued undetected, and varying fiscal policies and police enforcement limit the value of available figures.[25] In assessing attitudes towards drugs we are also primarily limited to literary records, which are generally products of elites and therefore are not necessarily reflective of popular attitudes. But it is the function of the historian to seek out and critically analyze the evidence which is available and to distill from the experience of the past, as far as it is accessible, that part which is amenable to rational explanation and interpretation.

Despite the limitations of much of the presently available data, the history of drug use is a rich lode of information which we have only just begun to mine. Inevitably, technological developments and improvements in transportation and communication will continue to make new, more potent drugs available. The more we learn about the factors which have generated and conditioned the impact of innovative drug use in the past, the better will we be able to deal with such innovations in the future.

NOTES

[1] Today there are only a few isolated societies in which psychoactive substances are not used; Blum et al. identified only 4 out of 247 different cultures (Society and Drugs, San Francisco: Jossey-Bass, 1969, pp. 135-179). Andrew Weil observes that the only people without a traditional intoxicant are the Eskimos, "who had the misfortune to be unable to grow anything and had to wait for white men to bring them alcohol" (The Natural Mind, Boston: Houghton-Mifflin, 1972, p. 17).

[2] Andrew Malcolm, The Pursuit of Intoxication (N.Y.: Washington Square Press, 1972), p. 41.

[3] Weil, Natural Mind, p. 17. Weil further argues that the very desire to periodically alter consciousness whether by drugs or some other means "is an innate, normal drive analogous to hunger or the sexual drive" (p. 19).

[4] As emphasized by Henry Brill, "Recurrent patterns in the history of drugs of dependence and some interpretations," in J. Wittenborn, et al., eds., Drugs and Youth (Springfield, Ill.: Thomas, 1969), pp. 8-10. On the general value of historical research, see Edward Carr, What is History? (N.Y.: Vintage, 1969), particularly pp. 138-139.

[5] National Commission, Drug Use in America, p. 41; Commission of Inquiry into the Non-medical Use of Drugs (LeDain Commission), Final Report (Ottawa, Canada: Information Canada, 1973), p. 35.

[6] H. Barry, "Sociocultural aspects of alcohol addiction," Assoc. Res. Nerv. Ment. Dis., 46: 455-471, 1968, p. 465.

[7] From a strict scientific point of view, a drug can be considered any substance other than food which by its chemical nature affects the structure or function of a living organism (National Commission, Drug Use in America, p. 9).

[8] Ibid, p. 10.

[9] The word "drug abuse" aptly illustrates Keller's observation that a word that nears meaning all things to all men is close to being meaningless (Mark Keller and Mairi McCormick, A Dictionary of Words about Alcohol, New Brunswick, N.J.: Rutgers Center of Alcohol Studies, 1968, p. xxi).

[10] Blum et al., Society and Drugs, p. 11.

[11] The National Commission (Drug Use in America, pp. 13-14) advocated that the term "drug abuse" be avoided in official pronouncements and public dialogues because the term has no functional utility and has become no more than an arbitrary codeword for that use which is presently considered wrong. On this concept, see also Bruce Johnson, Marijuana Users and Drug Subcultures (N.Y.: Wiley, 1973), p. 3, Michael Balter, "Drug Abuse: A conceptual analysis and overview of the current situation," in Eric Josephson and Eleanor Carroll, eds., Drug Use: Epidemiological and Sociological Approaches (Washington, D.C.: Hemisphere, 1974), pp. 3-21; Reginald Smart, "Addiction, dependency, abuse, or use: Which are we studying with epidemiology?" in idem, pp. 23-44; Norman Zinberg et al., "What is drug abuse?," J. Drug Issues, 8(1):9-35, 1978.

[12] Stanley Einstein and W. Garitano, "Treating the drug abuser," Int. J. Add., 7(2):321-331, 1972.

[13] On antique alcohol use, see the works of McKinlay cited in the bibliography as well as: Blum, Society and Drugs, pp. 25-33; E. Baird, "Alcohol problem and the law, I," Q.J. Stud. Alc., 4:539-543, 1943-1944; M. Keller, "Problems with alcohol: An historical perspective," in W. Filstead, et al., eds. Alcohol and Alcohol Problems. (Cambridge, Mass.: Ballinger, 1976), pp. 6-7. C. Patrick, Alcohol, Culture, and Society (Durham: U. of N. Carolina, 1952), pp. 12-21; S. Lucia, "The antiquity of alcohol in diet and medicine," in Alcohol and Civilization (N.Y.: McGraw-Hill, 1973), pp. 151-166; J. Leibowitz, "Studies in the history of alcoholism--II. Acute alcoholism in ancient Greece and Roman Medicine," Brit. J. Add., 62:83-86, 1967; E. Jellinek, "Drinkers and alcoholics in Ancient Rome," J. Stud. Alc., 37:1718-1741, 1976; W. Emboden, "Dionysus as a shaman and wine as a magician drug," J. Psychedelic Drugs, 9:187-192, 1977.

[14] Leibowitz, "Studies in the history of alcoholism"; Blum et al., Society and Drugs, p. 32; McKinlay, "Roman sobriety in the later Republic"; Baird, "Alcohol problem and the law," I, p. 543. Domitian's law was repealed around 280 A.D. because it was unenforceable.

[15] Blum et al., Society and Drugs, p. 27; McKinlay, "Early Roman sobriety"; Jellinek, "Drinkers in ancient Rome," pp. 1740-1741. Keller, "Problems with alcohol," p. 9, summarizes the earliest beginnings and the consequences of alcohol use through classical times as follows: "There was social integrative public drinking, and private drinking for pleasure which was moderate and not apparently harmful. There was ceremonial and religious and medicinal drinking. In short, drinking was widely practiced nearly everywhere in the world and drink was appreciated as a good, often as a particularly divine blessing, so recognized in the Old and New Testaments of the religions that have powerfully influenced our culture. There was also harmful overdrinking. It was common enough to attract the repeated condemnation of potentates and prophets, philosophers and physicians. It was alcoholism...They were addicted."

[16] Brill, "Recurrent patterns," p. 17, observes that except for alcohol, no ancient description of drug dependence has been found; see also n. 20.

[17] On the early history of cannabis use, see: H-L Li, "Origin and use of cannabis in Eastern Asia," in Rubin, V., ed. *Cannabis and Culture* (Hague: Mouton, 1975), pp. 52-62; S. Benet, "Early diffusion and folk uses of hemp," in *idem*, pp. 39-48; G. Nahas, "From bhang to delta-9-THC," in *Marijuana--Deceptive Weed* (N.Y.: Raven, 1973), pp. 1-58; R. Schultes, "Man and marihuana," *National History*, 82:58-82, 1973; G. Chopra, "Man and marihuana," *Int. J. Add.* 4:216-219, 1969; G. Chopra, "Drug abuse in ancient societies," *Drug Forum*, 4:317-329, 1975; National Commission, *Marihuana*, Appendix 1:3-6, 1972; E. Brecher et al., *Licit and Illicit Drugs* (Boston: Little, Brown, 1972), pp. 397-401; Blum et al., *Society and Drugs*, pp. 61-66; W. Emboden, "Ritual use of *Cannabis sativa L*," in Peter Furst, ed., *Flesh of the Gods* (N.Y.: Praeger, 1972), pp. 214-236; T. Brunner, "Marihuana in ancient Greece and Rome," *Bull. Hist. Med.*, 47:344-355, 1973.

[18] Li, "Origin and use of cannabis in Eastern Asia"; Nahas, "From bhang to delta 9-THC," p. 1-2; Blum et al., *Society and Drugs*, p. 61; Brunner, "Marihuana in ancient Greece and Rome;" Brill, "Recurrent patterns," p. 22.

[19] On the early history of opium use, see: P. Kritikos and S. Papadaki, "History of the poppy and of opium and their expansion in antiquity in the eastern Mediterranean area," *Bull. Narc.*, 19(3):17-35; (4):5-10, 1967; Kramer, *History of Opium*; Blum et al., *Society and Drugs*, pp. 45-47; G. Sonnedecker, "Emergence of the concept of opiate addiction," *J. Mondial Pharmacie*, 5(3):275-290, 1962; 6(1):27-34, 1963; Brill, "Recurrent patterns," pp. 14-15.

[20] Brill, "Recurrent patterns," p. 14, who postulates that opiate dependence may have occurred and been overlooked, but this seems unlikely as the ancients were sufficiently sophisticated to describe alcoholism in considerable detail. An alternative explanation is that the conditions of the time were such as to foster no addicition other than alcoholism. Kramer, *History of Opium*, suggests that because opium was seldom used alone, but rather as an element in a compound, dilution made prescribing difficult and made the role of opium obscure to patient and doctor.

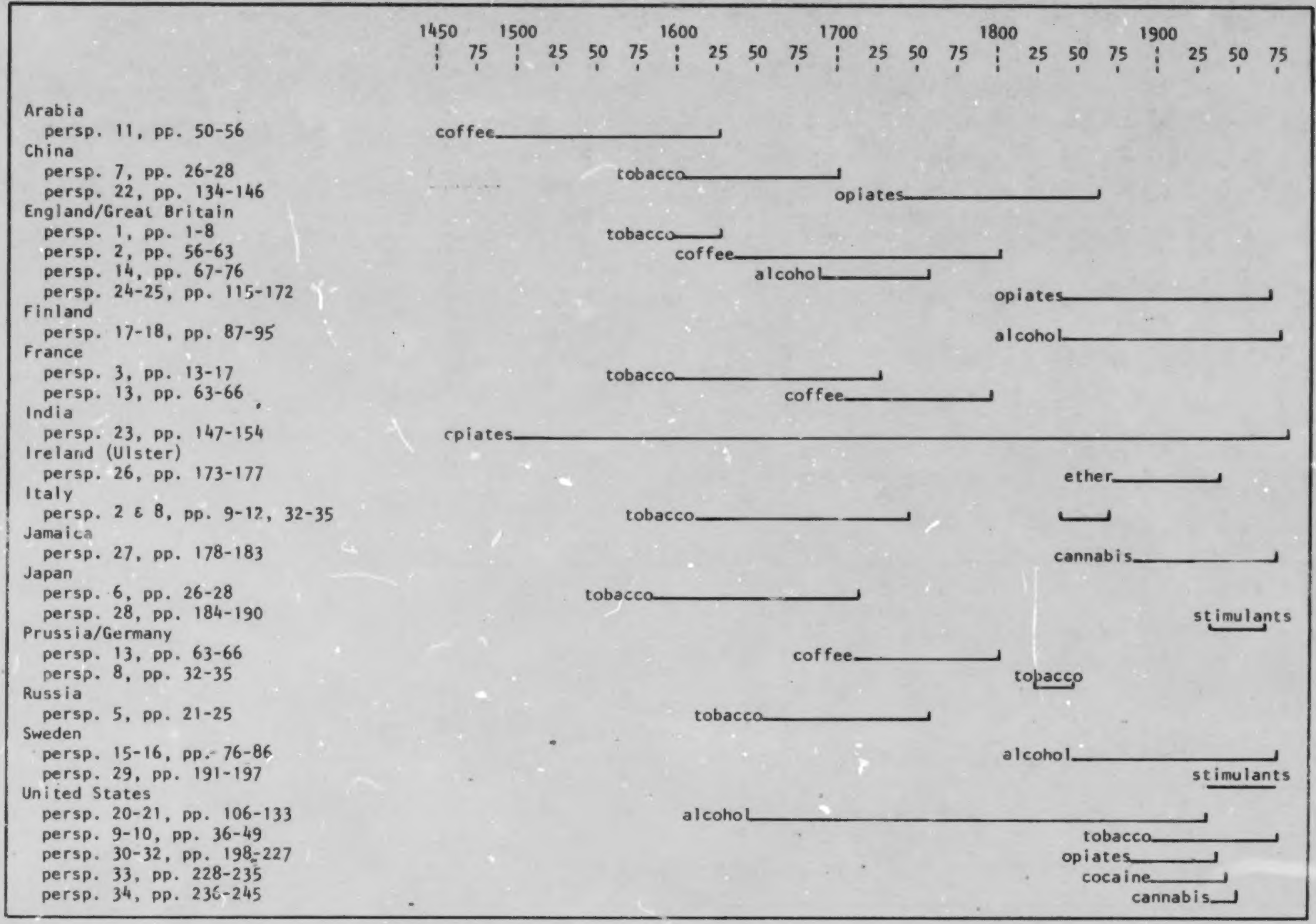
[21] On this, see Brill, "Recurrent patterns," pp. 14-15.

[22] Blum, *Society and Drugs*, p. 11.

[23] Keller, "Problems with alcohol," p. 14.; S. Bacon, "Classic temperance movement of the USA," *Brit. J. Add.*, 62:5-18, 1967, p. 5.

[24] Carr, *What is History?*, pp. 33-36.

[25] On this subject, see particularly Brian Harrison, "Drink and sobriety in England: 1815-1872: A critical bibliography," *Int. Review of Social History*, 12(2):204-276, 1967; Baird, "Alcohol problem and the law," *Q.J. Stud. Alc.*, 4:535-539, 5:148; Blum et al., *Society and Drugs*, pp. 4-5.



SUMMARY CHART

SYNOPTIC CHRONOLOGY

Classical Antiquity

GENERAL DRUG USE

In classical Greece and Rome, only alcohol, the oldest documented compound of abuse, poses a significant problem. Opium is widely employed only as a medicine; great caution is advised in its use, it is seldom used alone, and the phenomena of dependence and abuse are not recorded. While cannabis use is widespread in Asia Minor and Assyria, there appears to be little use of cannabis in Greek and Roman cultures.

c. 700-800

OPIATES

China/India. The opium poppy is introduced by Arabs (who inherited and expanded the classical medical legacy and knowledge of opium). At first use is limited to medicinal purposes, and it is consumed in a beverage made from the seeds.

c. 1000

OPIATES

China. The medicinal use of opium poppy seeds is widespread. By 1100, the more potent capsule is in use, but pure opium is not extracted from the capsule.

India. Opium is cultivated, eaten, and drunk by all classes as a household remedy; it is used by rulers as an indulgence, and given to soldiers to increase their courage.

c. 1250

ALCOHOL

Europe. The technique of distillation becomes known in Europe, making it possible to produce more potent and convenient alcoholic beverages. Until the 16th century, however, distilled or spiritous liquors primarily are made from wine (such as brandy), are costly, and are used only by the wealthy as a medicine. Credited with extraordinary healing powers, their common name is *aqua vitae*, "water of life."

c. 1300

COCAINE

Inca Empire. Throughout the period of the Inca Empire (1200-1553), the chewing of coca leaves is central to Inca religious and social systems, with use controlled by ritual sanctions. The leaves of the plant are used for their euphoric, energizing effects and the plant is viewed as a divine gift of the Sun God.

c. 1300 (cont'd)

COFFEE

Arabia. The technique of coffee roasting is developed. Indigenous to Ethiopia, coffee was previously extremely expensive; its use remained localized and limited to medicinal purposes; and the beans were chewed or an infusion was made from the leaves. The technique of roasting makes coffee cheaper, more available, and more pleasant to consume. Cultivation and use of coffee expands into Arabia.

1450-1475

COFFEE

Arabia. Coffee cultivation and drinking spreads rapidly in Yemen, at first for medicinal and religious purposes, such as promoting alertness during long nights of devotional exercises.

1475-1500

COFFEE

Arabia. Dervishes spread the use of coffee to Medina and Mecca. Secular use becomes more prominent, in part because wine is forbidden by the Koran. Coffee houses are established and coffee becomes a much desired luxury. Many holy men begin to attack coffee as also contrary to the Koran.

c. 1500

GENERAL DRUG USE

Europe. Psychoactive drug use begins to become more widespread and diverse. European explorers and travelers discover and bring back a wide variety of new drugs: tobacco, coca, cocoa, and cassina from the New World; coffee from Arabia and Turkey; the kola nut from Africa; and tea from China. At the same time, major sociocultural changes make the Western world more receptive to the adoption of innovative drug use. Previous social and religious controls are loosened and society generally becomes more urban, complex, secular, and free. The problem of uncontrolled alcohol consumption also increases as religious, social, and political changes weaken traditional controls and the recreational consumption of new distilled spirits spreads. Luther, Calvin, and other Reformation leaders emphasize the need for temperance; for the first time entire books are devoted to this subject.

OPIATES

China. The medicinal use of pure opium is fully established; native opium is manufactured, but recreational use is still limited.

India. Earliest western records of opium as a product of India and its widespread use occur.

TOBACCO

General. Tobacco smoking is first observed by Europeans as Columbus lands in the New World.

1500-1525

COFFEE

Arabia/Turkey. Coffee use reaches Cairo (1510) and Constantinople (1517). Coffee is attacked in Mecca as forbidden by the Koran; coffee houses are viewed by political and religious authorities as centers of sin and sedition. A week long "reign of terror" fails to eradicate its use (1511). In 1524, renewed civil disorders in Mecca cause the coffee houses to be closed again.

1525-1550

ALCOHOL

England. Excessive use of distilled spirits is first apparent.

COFFEE

Arabia/Turkey. The coffee controversy spreads throughout the Ottoman Empire, as coffee--the "Wine of Islam"--becomes a regular article of diet in all classes. Sultan Suleiman the Great bans coffee in 1542, but coffee houses multiply in Constantinople.

OPIATES

India. The first Moghul dynasty is founded; poppy cultivation and opium sales become a state monopoly (1526).

1550-1575

ALCOHOL

England. Thomas Nash describes widespread inebriety in Elizabethan England; drunkenness is mentioned for the first time as a crime, and preventive statutes multiply.

COCAINE

Inca Empire. Pizarro invades and destroys the Inca Empire (1553); Nicolas Monardes reports an increase in coca chewing particularly among lower classes of Andean Indians, as traditional controls disappear (1569).

COFFEE

Arabia/Turkey. Coffee houses continue to spread in Constantinople, where they are known as "schools of wisdom." Mohammedan priests again declare that coffee is forbidden by the Koran.

OPIATES

India. Opium becomes a major source of government revenue. Opium eating and drinking is widespread, but it is consumed in small quantities.

TOBACCO

Europe. Tobacco is introduced into Western Europe. In 1556 Andre Thevet brings tobacco seeds from Brazil to France. Tobacco is dubbed *nicotiana* in honor of Jean Nicot, who describes its medicinal properties (1559) and sends it as a medicine to the French court. In 1565 tobacco seeds are introduced into England, but smoking does not spread until Sir Walter Raleigh makes it fashionable in the court in the mid-1570s.

1575-1600

COCAINE

Europe. Monardes brings coca leaves to Europe (1580); unlike tobacco, it fails to generate interest or use, possibly because most coca leaves lost their potency during the long voyage.

COFFEE

Arabia/Turkey. The Sultan orders all coffee-houses closed on religious grounds, to little effect. Finally, the coffee ban is lifted in the Ottoman Empire, and the government comes to rely on coffee as an important source of revenue.

Europe. Coffee first comes to the attention of European travelers.

1575-1600 *(cont'd)*

TOBACCO

General. Although smoking for pleasure is still controversial, tobacco as a medicine is almost universally approved. Nicolas Monardes devotes the second part of his book on New World plants to a lengthy section on tobacco, recommending it as an infallible cure for 36 different ailments. Summing up current beliefs regarding this much praised herba panacea or holy herb, Monardes' work (1571, 1574) becomes the fundamental source for all subsequent protobacco literature.

China. Limited smoking is apparent in S. China, probably introduced by Portuguese sailors and merchants.

England. Introduced into the court by Sir Walter Raleigh, smoking becomes the "duty" of every man of fashion; tobacco is worth its weight in silver. Numerous publications praise its medicinal virtues, starting with John Frampton's translation of Monardes, titled Joyful Newes Oute of the Newe Founde Worlde (1577).

Italy. Tobacco is cultivated as a medicinal herb in Tuscany and Rome, but there is no evidence that it is widely smoked.

Japan. Limited smoking is apparent, probably introduced by Portuguese sailors and merchants.

Turkey. Sultan Murad II cultivates tobacco as a novelty and a medicine; smoking is introduced by the English.

1600-1625

ALCOHOL

America. From the founding of the English colonies, drunkenness is prominent, but it is not considered a major problem, nor stigmatized behavior. As in England the consumption of beers and wines, particularly home-brews, is integrated into every aspect of colonial family life. Abuse is condemned and temperance is advocated, but alcohol itself is highly esteemed as in England as the Good Creature of God, a beneficial gift to man.

England. During the reign of James I, numerous writers describe widespread drunkenness from beer and wine among all classes. Alcohol use is tied to every endeavor and phase of life, a condition that continues well into the eighteenth century. Parliament passes "The Act to Repress the Odious and Loathsome Sin of Drunkenness" (1606).

COFFEE

Arabia/Turkey. Another brief attempt at closing coffee houses as centers of sedition fails.

England. Coffee is introduced as a luxury, medicament, and panacea; its use is encouraged as a cure for widespread drunkenness.

TOBACCO

America. New World colonists begin tobacco cultivation. In 1613 John Rolfe sends the first shipment of Virginia tobacco to England. Tobacco soon becomes a major New World crop.

China. Smoking is introduced into N. China during wars with Japan; use also is spread by invading Manchu armies. Tobacco is heralded as a medicine for colds, malaria, and cholera.

England. Smoking spreads rapidly, becoming an expensive fad among the court and nobility. Many also take up smoking as a preventative against the plague (1614). Works such as Barclay's Nephentes; or the Virtues of Tobacco (1614) continue to praise its medicinal properties, but concern is increasing that tobacco is undermining the moral and economic well being of the country. Anti-tobacco writings begin to appear, attacking the exorbitant medicinal claims and excessive recreational use by fashionable dandies. Most notable of these attacks is King James I's Counterblaste to Tobacco (1603). James unsuccessfully

1600-1625 (cont'd)

TOBACCO (cont'd)

attempts to control use through prohibitive taxation (1604); as smuggling increases he lowers the tariff and sells the right to collect it for government revenues (1608, 1618). A royal tobacco monopoly is then established (1624), aiming to generate revenues by keeping the tobacco duty as high as possible without causing smuggling.

France/Italy. Use spreads within the Italian and French courts and clergy, and from there throughout the populace. The habit is also spread by returning sailors from the New World.

Japan. Cultivation begins and smoking spreads among all classes, prompting several severe imperial prohibitions (1603+). Prohibitions are governed by fears over outbreaks of fires, foreign influences, and interference in the cultivation of more valuable food crops such as rice. Despite increasing penalties, including property confiscations, death threats, fines and imprisonment, all bans fail. The prohibitions gradually fall into disuse from lack of enforcement.

Russia. Smoking is introduced by Western European and Turkish sailors and by travelers from Cental Europe.

Turkey. Smoking is introduced from the West; use spreads rapidly. Immediately a controversy develops over whether smoking is forbidden by the Koran. Sultan Ahmed I prohibits it; many poets praise it, along with coffee, opium, and wine, as one of the four elements of the world of pleasure.

1625-1650

ALCOHOL

America. Massachusetts laws attempt to control widespread drunkenness, particularly from home-brews, and to supervise taverns. At the same time each town is ordered to establish a man to sell wines and "strong water" so that the public will not suffer from lack of proper accommodations (1637); inns are required to provide beer for entertainment (1649).

TOBACCO

China. The Ming emperor decrees any person trafficking in tobacco will be decapitated (1638); the decree proves ineffectual as smoking spreads within the court. A second prohibition is issued in 1641.

England. Increasingly, medicinal use declines and smoking becomes primarily a pleasurable pastime. The government comes to rely on tobacco duties as a main source of revenue. By the 1630's, smoking has overcome most opposition; use spreads as tobacco prices decline markedly.

France. Despite high prices, smoking spreads among the lower classes; snuffing is more prevalent among the nobility, who consider it a more dignified and aristocratic mode of use. Cardinal Richelieu imposes high duties on tobacco to discourage use and to create general revenues (1629), feeling that taxation would be more profitable than direct prohibition. In 1635, sales are restricted to prescriptions. By the reign of Louis XIV (1643-1715), use is widespread and highly praised, despite the King's personal disapproval.

Italy. The first import monopolies are established.

Japan. Smoking takes its place in polite society.

Papacy. Two papal bulls ban tobacco use by the clergy under penalty of excommunication (1642, 1650).

Prussia. The 30 Years War spreads smoking throughout Cental and Eastern Europe. In Luneberg, Germany, the penalty for smoking is death.

1625-1650 *(cont'd)*

TOBACCO (cont'd)

Russia. Tsar Michael Romanov and the clergy attack smoking as a sin, an abomination, and a cause of fires. Literature is extremely hostile; it is called "the devil's plant." Although smoking is forbidden under penalty of exile and torture (1630), financial pressures cause the ban to be momentarily rescinded (1643).

Turkey. Sultan Murad IV establishes the death penalty for smoking in the Ottoman Empire; use still spreads, although many turn to less detectable snuff. By mid-century, the ban is repealed and cultivation spreads.

1650-1675

ALCOHOL

America. New England colonies attempt to establish a precise definition of drunkenness that includes the time spent drinking, amount, and behavior. Massachusetts laws against home-brews are reaffirmed (1654); a law forbidding the payment of wages in the form of alcohol results in a labor strike (1672). Increase Mather writes Wo to Drunkards (1673).

England. Gin is developed in Holland (c. 1650) by distilling grain with the juniper berry. gin can be produced cheaply and plentifully, and the gin industry grows rapidly in England after it is introduced by British soldiers fighting in the Low Countries.

COFFEE

General. Coffee use spreads throughout the world, although often in the face of severe official resistance. Use generally begins among the upper classes and aristocrats and is copied by the lower and middle classes as prices decline. Although many coffee houses also serve beer and wine, the spread of coffee use in Europe's rapidly growing cities is soon facilitated by growing resentment against the effects of alcohol and the need for a center for sober social intercourse and intellectual discussions.

England. Coffee houses spread into England. Filling an important public need for a meeting place which does not serve alcoholic beverages, the coffee houses become centers for the exchange of news and for political and intellectual debates. Coffee use increases, particulary during the plague of 1664, as it is considered therapeutic. Coffee, as well as tea and brandy, is vigorously attacked by brewers as interfering with the consumption of the native products of barley, malt, and wheat (1673). Duties and licenses are imposed. In a period of turbulent political, social, and economic unrest, the coffee houses are closely watched by government officials who view them as centers of sedition, as in Turkey. Strong government opposition mounts, although the government derives considerable revenues from coffee. During this period, tea is also introduced and regularly imported by the East India Co. The fashion of the afternoon tea break begins. Both coffee and tea are praised for their curative powers, but as nonmedical use spreads, many come to view both as dangerous drinks.

TOBACCO

China. The Manchu, having conquered China, revoke all existing smoking bans (1644). China becomes the great smoking nation of Asia. Snuff is introduced by the Jesuits.

France. Louis XIV establishes a monopoly in imitation of the Italians (1674).

Italy. Venice establishes the first tobacco appalto or state monopoly, selling the exclusive right to import, manufacture, or trade in tobacco to a private party (1659).

Japan. All prohibitions are repealed.

Papacy. Pope Alexander VII farms out spirits and tobacco monopolies (1655, 1660).

Russia. Another smoking ban is established, with a death penalty (1674). Use continues to increase; restraints are lifted (c. 1676), and smoking spreads from the court and foreign circles to the general population.

1675-1700

ALCOHOL

America. The office of tithingman is established in Massachusetts to report on liquor violations in homes (1675). Cotton Mather blames growing irreligiosity on excess tippling (1694).

England. New laws encourage the distillation and sale of spirits for revenues and support of the landed aristocracy (1690). The production of distilled liquors, mostly gin, increases dramatically; so does use, particulary among the poor. Excessive consumption of beer and wine is still prevalent among the middle and upper classes.

COFFEE

England. King Charles II fails in his attempt to suppress the coffee houses as centers of sedition (1675); the ban is recalled within a few days and is replaced by heavy taxation. Hereafter, coffee houses spread with little resistance, becoming centers of daily social life. Many coffee houses also give special prominence to tea.

France. Many doctors are against coffee drinking and at first only limited use appears in the courts and upper classes. In order to pay for his wars, Louis XIV of France grants the first of several coffee monopolies (1692), all of which are extremely unpopular. The first monopoly fails because the price of coffee is set too high.

OPIATES

England. Thomas Sydenham, writes, "Among the remedies which has pleased the Almighty God to give man to relieve his sufferings, none is so universal and so effacacious as opium." Sydenham exemplifies the contemporary medical profession's enthusiastic advocacy of opium. As the 18th century progresses, there is growing interest in the problems encountered with sustained use of opium, as well as in its therapeutic potential.

TOBACCO

France. The French tobacco monopoly proves unpopular and unworkable, generating smuggling, bribery, and corruption.

Russia. Clerical opposition mounts to smoking and other Western European influences, but gradually legal restraints are lifted. Finally, Tsar Peter the Great (1684-1725) adopts smoking, lifts all bans, and establishes a trade monopoly with the English (1698), much to the disapproval of the church.

1700-1725

ALCOHOL

America. Concern over drunkenness begins to increase as the use of distilled spirits (rum and whiskey) rises and supplants the traditional use of beers and hard ciders. Liquor licenses are awarded with greater frequency and more taverns appear. Drinking becomes primarily a male pastime spent away from the home. Still, such concerns were infrequently expressed and usually were limited to the wealthy and powerful; most colonials viewed drunkenness as a natural, and essentially harmless, consequence of drinking.

England. Home distillation is encouraged by high import duties and other legislation. Defoe praises the "honest drunken fellow" as the archetypal Englishman. While hard drinking is still extensive among the upper classes, it begins to decline, never to be as general as in Elizabethan times. In part this is because of the spread of coffee use.

COFFEE

England. Coffee begins to have a perceptible influence in diminishing drunkenness among the upper classes; Londoners consume more coffee than any other city in the world.

1700-1725 (cont'd)

COFFEE (cont'd)

France. The court of Louis XV develops a passion for coffee.

Prussia. The first coffee house is permitted in Berlin (1721).

OPIATES

China. The smoking of tobacco-opium mixtures and later of opium alone spreads from the East Indies to Formosa, Fukien and the South China coast. Only now does China begin to develop a problem with the recreational use of opium.

India. The Moghul empire and the state opium monopoly begin to collapse. A brief period of opium smoking among the upper classes follows, but the practice soon falls into disrepute. Unlike in China, opium smoking never becomes prominent.

TOBACCO

General. Opposition in Western Europe declines as all classes now smoke. Spreading from France, snuff-taking becomes fashionable among the nobility and clergy.

China. Tobacco cultivation and snuffing among the aristocracy is firmly established.

England. Snuff is introduced by courtiers returning from France.

France. Snuffing supplants smoking among the upper classes.

Papacy. The papal bulls against clerical tobacco use are repealed (1725).

1725-1750

ALCOHOL

America. Cotton Mather writes Seasonable Advice Concerning Taverns (1726). Prohibition of spirits is attempted in Georgia, but fails (the Oglethorpe Experiment, 1733-1742). In the general rules of the Methodist church, John Wesley includes a prohibition against drunkenness and the buying, selling, or drinking of spirits (1743).

England. Gin drinking reaches epidemic proportions among the London poor. Crime and the death rate also rise, causing considerable consternation among the middle and upper classes. Parliament passes the first Gin Act (1729), whose high duties result in the production of bad, bootlegged gin, prompting widespread protests. Laws are liberalized and drunkenness increases even further (1733). The degeneration of the London poor is placed on gin, and a heated debate over prohibition occurs (1736). The second Gin Act establishing a prohibitory tax provokes even greater protests (1736) and the act is replaced by a licensing system (1743). Further liberalization allowing for freer sales causes another increase in consumption (1747).

COFFEE

General. Bach writes the Coffee Cantata (1732) inspired by protests in France and Germany over coffee restrictions.

England. The vogue of coffee houses peaks. As an outgrowth of the conquest of India, tea becomes a commodity of the British Empire and its use begins to be encouraged over that of coffee. The importation of cheaper green tea leads to a steady increase in tea drinking among all classes throughout the 18th century.

Prussia. Coffee use spreads from the court to the upper bourgeoisie.

1725-1750 *(cont'd)*

OPIATES

China. The emperor prohibits sales of opium and operation of smoking houses (1729); the problem remains localized.

1750-1775

ALCOHOL

America. The popularity of spirits among all classes continues to increase. John Wesley calls for prohibitions against all distilling (1773), perhaps marking the institutional beginnings of the abstinence movement.

England. Middle class concerns peak. Fielding's An Inquiry into the Causes of the Late Increase of Robbers denounces the evils of gin, "the grand destroyer" (1751). A new Gin Act (1751) attempts to return to the 1743 legislation, strengthening retail controls and aiming to license sales rather than restrict them. Drunkenness begins to decline, with coffee and tea often taking the place of alcoholic beverages.

COFFEE

America. As an outgrowth of heavy tea taxes and the Boston Tea Party (1773), abstinence from tea is equated with the quest for liberty. The colonial tradition of tea drinking permanently declines and coffee consumption increases. Dr. Benjamin Rush writes numerous papers on the ravages caused by tea drinking, although after the revolutionary war he promotes tea as an alternative to alcohol.

England. Coffee use begins to decline; tea use continues to increase.

Prussia. In order to pay his war debts, King Frederick the Great attempts to establish coffee, tea, and tobacco monopolies (1763), regarding the substances as luxuries fit for high taxation. He later tries to restrict coffee use to the court when he discovers it detracts from beer consumption and his revenues from it (1770's). A prohibitive tax is established.

OPIATES

England. Dr. John Jones declares that properly used, opium would cure, not merely alleviate, symptoms of many disorders (The Mysteries of Opium Reveal'd, 1770). His unbounded enthusiasm goes beyond even Sydenham's. Dover's Powder is introduced and becomes one of the most widely used opium preparations for the next 150 years.

India. The British East India Company begins to expand its influence throughout India. It assumes control of the opium growing districts of Bengal and Bihar and establishes a limited monopoly over the trade (1757), attempting to popularize its use to increase revenues. The British government passes a regulatory act which leaves the company free to carry on its trading activities but places all British subjects in India under parliamentary control and a single governor-general (1773). The first governor, Warren Hastings, attempts to bring the opium trade under more government control, limiting opium cultivation and production (1773).

TOBACCO

Prussia. King Frederick, a francophile, spreads the snuff fashion and establishes a tobacco monopoly.

1775-1800

ALCOHOL

America. By the Revolution, Americans, for the most part, still show little concern over drunkenness, and spiritous liquors have become one of the greatest factors in colonial commerce. The first serious and effective efforts to regulate liquor consumption, particularly within the army, does occur during the war. Following it, social conditions weaken traditional controls over drunkenness and consumption increases even further. The early temperance movement develops among New England Federalists; the most prominent spokesperson is Benjamin Rush, author of Inquiry into the Effects of Ardent Spirits on the Human Mind and Body (1785), who is one of the first to challenge popular beliefs in the health benefits of spirits. He recommends for temperance and health the use of fermented alcoholic beverages rather than spirits. This early movement relies on the technique of persuasion to bring about such temperance. Congressional attempts to impose a tax on distilled spirits results in the Whiskey Rebellion (1794).

COFFEE

Prussia. Frederick the Great issues a Coffee Manifesto asserting that all citizens must drink beer instead of coffee. As coffee smuggling and use continues, he creates an unsuccessful coffee monopoly, forbidding coffee roasting except in royal establishments (1781). The use of coffee substitutes such as chicory appears. In 1787, his successor lowers the tax and ends these restrictions.

OPIATES

China. British opium traders from India establish depots at Canton and Macao and the commercial importance of opium in the British trade balance begins to increase. As opium smoking spreads, imperial edicts prohibit importation, consumption, and sale (1780, 1796, 1800). Opium smoking reaches Peking (1790).

TOBACCO

France. The French-American tobacco trade is developed and helps finance the American Revolution. The French Revolution repeals the hated tobacco monopoly but it is reinstated by Napoleon, who desires the revenues it generates.

1800-1825

ALCOHOL

Finland. The ending of restrictions against home manufacturing results in increased consumption.

Sweden. The ending of the crown alcohol monopoly and its restrictions on production and sales results in increased consumption.

United States. Between 1790 and 1830, Americans seem to go on an alcoholic binge; the per capita consumption of distilled spirits rises dramatically as migration and social dislocation further dislodge traditional controls. The New England Federalist elite begins to worry about the spread of religious irreverence, democracy, and drunkenness; religious revivalism encourages general temperance activities.

OPIATES

General. Morphine is isolated (1803).

Britain. De Quincey's Confessions of an English Opium Eater (1822) focuses attention on opium addiction as never before. Throughout the 19th century, opium is utilized and prescribed by doctors as a therapeutic agent; laudanum, patent medicines, and other opium-bearing preparations are freely available without prescriptions and are cheaper than alcohol. Use increases, particularly among the working classes. This increase briefly encourages domestic opium cultivation.

1800-1825 (cont'd)

OPIATES (cont'd)

China. Punishments are increased and an antiopium trade offensive begins, but the flow of smuggled opium remains uncontrollable.

India. The British emerge as the controlling power in India. The Bengal Resolution (1813) inaugurates a policy of restricting the habit of opium-eating by obtaining the "maximum revenue from the minimium consumption." The British government declares it will countenance only to the narrowest extent a habit which it finds impossible to irradicate.

1825-1850

ALCOHOL

Finland. The earliest signs of a temperance movement appear.

Sweden. Drunkenness increases uncontrollably.

United States. The temperance movement undergoes a period of major flux and transition. Demands increase for voluntary total abstinence from all intoxicants, not just temperance in the use of spirits. Lymon Beecher writes Six Sermons on Intemperance (1825) and the American Society for the Promotion of Temperance (1826) is founded. The first national temperance convention is held (1833) and the Washington Temperance Society is founded (1840). The temperance movement begins to expand and attract the middle classes and a decline in aristocratic leadership occurs. The movement still primarily aims for a voluntary reform in manner and morals through persuasion and education, but more attention begins to be placed on coercive legislation.

OPIATES

Britain. Opium use is endemic among Fenish peoples, who both tolerate and successfully control use by informal social mechanisms. Concerns grow over increasing use, particularly in the sedation of infants. By 1840, it is apparent that opium use is increasing, but opinions differ as to how harmful this is. On the whole the dangers of use are downplayed, few parallels are seen with the Chinese situation, and existing concerns are not as extensive as those over alcohol abuse.

China. Court officials suggest prohibition be dropped as ineffective, but the emperor rejects this (1833, 1836). Facing competition from other opium producers, the British step up their efforts to increase their exports to China (1821-1830). Unhappy with the lack of growth in the China market in general, the British government takes over control of the China trade from the East India Company (1833). The Chinese vigorously enforce the antiopium policy by ordering the executions of all smokers and dealers. The first war with the British occurs (1839-1842); China is defeated and Chinese trade restrictions are removed. The opium trade doubles in 10 years (1842-1852).

United States. The first statute taxing opium imports is passed.

TOBACCO

Italy. A "tobacco war" is waged in 1848 modeled on the Boston Tea Party in protest against Austrian overlordship and the Austrian control of the tobacco monopoly.

Prussia. Berliners protest tobacco smoking restrictions; smoking bans are lifted during several cholera epidemics because of the belief that smoking is preventative. Finally, as an outgrowth of the 1848 revolution, all bans are removed.

United States. An antitobacco crusade is launched in conjunction with early temperance agitation.

1850-1875

ALCOHOL

Finland. Home spirits manufacturing and rural sales are prohibited; limits are placed on urban sales (1865).

Sweden. Local regulation of liquor sales and consumption begins (1850), followed by national action (1855). The city of Gothenburg establishes a licensing company to operate public houses (the Gothenburg system), aiming to eliminate private financial interests and devote profits to public purposes (1865). The System is soon adopted by other cities.

United States. The temperance movement undergoes internal conflict between reform philosophies; prohibition campaigns occurring in practically every state mark the transition from a reliance on persuasion and voluntary action to legal enforcement. Maine passes the first state prohibition law (1851), followed by 13 other states. By 1865 this first wave of prohibition laws ends in failure. Following the Civil War, the national Prohibition Party (1869) and the Women's Christian Temperance Union (1874) are founded.

CANNABIS

Jamaica. Indentured laborers from India arrive, bringing with them the multi-purpose use of cannabis, or ganja.

United States. Despite ready availability and general use in medical practice for a wide range of conditions, cannabis is little used for intoxicating purposes.

COCAINE

General. The chief alkaloid of coca is isolated and called cocaine (1859/60). Dr. Pablo Mantegazzo publishes an essay praising coca's ability to lessen fatigue, stimulate strength, elevate spirits, and enhance sexual potency and desire (1859). Vin Mariani, a wine mixed with coca, is introduced and becomes a major success; Pope Leo XIII gives a gold medal to its developer as a benefactor of mankind (1863-1865).

ETHER

General. Introduced in the early 18th century as a medicine and solvent, ether is not widely used recreationally until the 19th century. By the 1840's, when its anesthetic properties are discovered, ether frolics produced either by inhalation or by drinking a few drops of ether in water are already common among the upper classes (mostly youths) of Europe and America.

Ireland. Ether is introduced into N. Ireland as a preventive and folk remedy (1840); recreational drinking spreads in the Ulster counties of Londonderry and Tyrone, possibly begun by the example of a physician in Draperstown. Poverty, temperance crusades, and high alcohol taxes (1855) encourage its use as a cheap, readily available alcohol substitute, especially by lower class Catholics. Priests begin attempts to suppress ether drinking by cursing it as a sin (1869).

OPIATES

General. Although in mid-century the role of opium in medical practice is still unchallenged, following 1850 several events begin to alter the traditional picture of opiate dependency in Britain and the U.S., and discussions of opium become more critical. These events include: (1) the introduction of morphine; (2) the development of the hypodermic needle (1853) which makes possible the direct injection of drugs into the body; (3) increased advertising, overprescription, mass production, and use of opium-bearing patent medicines; (4) the introduction of opium smoking; (5) increasing concerns over cocaine use; (6) greater advances in precise identification and analysis of drug effects and an increasing understanding of the phenomenon of habituation; (7) the prevailing spirit of moral reform as exemplified by the temperance and Progressive movements in the U.S.; (8) America's direct involvement with the opium problem in the Philippines; (9) the discovery of newer, less dangerous pain killers and anesthetics; (10) attention generated by the debate over opium trade and confessions such as De Quincey's.

1850-1875 (cont'd)

OPIATES (cont'd)

China. The second Anglo-Chinese war occurs (the Arrow War, 1856-1860); the British win and the Treaty of Tientsin is signed, legalizing opium.

India. As a result of a dangerous rebellion, the British government finally dissolves the British East India company and the Moghul Empire and begins to rule India directly (1858). Having already taken over the opium trade (1833), the government inaugurates a period of "mad expansion" of opium cultivation in order to increase revenues. Opium revenues are now the single largest source of revenues outside of land and salt.

Britain. Increasingly proposals are made to abolish the opium trade. The medical profession still disagrees over the extent of damage caused by opium. Commercial opium becomes more freely and cheaply available due to lower import duties; opium is now cheaper than alcoholic beverages. The Pharmacy Act of 1868, one of the first laws restricting the sale of opiates, dictates that opiates can only be sold by registered chemists or druggists, but patent medicines are specifically excluded.

United States. Immigrant Chinese laborers bring the habit of opium smoking to the U.S. Following the Civil War, use of opiates becomes widespread. Expanded advertising creates an unregulated patent medicine craze.

TOBACCO

United States. Cigarettes are brought home by American tourists from Europe; use spreads during the Civil War and the first federal excise tax is imposed. Following the war, the tobacco industry expands rapidly.

1875-1900

ALCOHOL

Finland. Drunkenness becomes a major problem among unskilled urban laborers and a prohibition movement develops (1384). All beverages containing over 22% alcohol are regulated; all rural sales are banned (1885). The Gothenburg system is established in the cities.

Sweden. Cities continue to adopt the Gothenburg System.

United States. Prohibitionists broaden their attack; they step up their compaign from state and local legislation to the national level; tighter organization and more coercive tactics are employed. The first prohibition amendment to the Constitution is introduced into Congress (1876) and a second wave of state prohibition laws occurs (1880-1904). The Prohibition Party's efforts at partisan politics fails and in its place the Anti-Saloon League takes over leadership of the movement (1893). The movement's appeal spreads among middle class, nativist Protestants threatened by changes rooted in industrialization, urbanization, and massive immigration, and who seek to uphold their position and the values of industry, frugality, sobriety, and religiosity.

CANNABIS

General. The Report of the Indian Hemp Drugs Commission concludes that in regard to physical effects, "the moderate use of hemp drugs is practically attended by no evil results at all."

Jamaica. The first official mention of ganja smoking appears, as chronic use spreads among lower class males.

1875-1900 (cont'd)

COCAINE

General. Sigmund Freud describes and praises the effects of cocaine as a "magical drug," and suggests medical uses for it such as anesthesia (1884-1887). Other physicians concur, but Freud is also attacked for releasing "the third scourge of mankind"; cocaine is denounced as an addictive drug worse than morphine. Carl Koller demonstrates its usefulness in medical practice as an anesthetic in eye surgery (1884).

United States. Cocaine becomes widely used for a variety of medical problems and is regularly included in numerous tonics and stimulant drinks, such as Coca-Cola (1892). Lavishly praised by physicians and widely advertised by the patent medicine industry, use grows rapidly. Cocaine appears to be the ideal stimulant for industrious Americans, but by 1890 warnings begin to appear about the dangers of indiscriminate sale and use. Recreational use spreads into the lower classes and medical opinion becomes more cautious. State and local regulations begin to appear.

ETHER

General. Ether drinkers become more numerous and diverse as ether becomes more available and cheaper, and temperance campaigns and fiscal policies make alcohol less desirable, less available, and costlier. By the 1890's, the use of ether as an intoxicant by sophisticated upper classes has declined, possibly in part because of a rise in the availability and popularity of morphine which is pleasanter to use and leaves no tell-tale smell. Use continues to grow among lower classes and peasant communities of Prussia, Hungary, Austria, Russia, Norway, France, and Great Britain. As in Ireland, heavy alcohol taxes may have contributed to this phenomenon.

Ireland. Local priests continue to attack spreading use; alcohol becomes even less available. It is estimated that 1/8th of the population of Londonderry and Tyrone counties use ether by 1890. The spread of ether into other counties is driven back by the church and the law before it can take root; also a richer peasantry finds the drug less appealing and abandons use after limited experimentation. Ether is scheduled under the British Poisons Act of 1870, limiting its sale to qualified pharmacists. All imports are banned (most ether is imported from England and Scotland); within months imports are reduced by 80%, with apparently little illicit home manufacturing occurring.

OPIATES

General. First warnings against morphine appear. Heroin is synthesized and is recommended as a more effective medicine, and less dangerous and addicting, than morphine (1874).

Britain. Various religious and moral reformers begin a crusade over the "evil" opium trade with China, led by the Anglo Oriental Society for the Suppression of the Opium Trade and by Joshua Rowntree. Agitation reaches its height in 1889-1893. The Pharmacy Act of 1868 is extended to patent medicines and use begins to decline.

India. Under pressure from British antiopiumists, the British Government of India appoints a royal commission (1893-1895) to inquire into the prevalence of opium use in India. The commission reports that oral use is common and would be impossible to prohibit, but is generally moderate, with little excess, and primarily medical or quasi-medical in purpose. Opium smoking is still "comparatively rare and novel." The commission concludes that opium is more like the West's alcohol than a substance to be feared; its antiprohibition stand becomes official government policy.

United States. The patent medicine craze peaks (1870-1880). Between the Civil War and World War I opiate use appears widespread and uncontrollable. Two patterns of use become apparent. In one, typical users are white, middle class, middle aged, and mostly women, with use being therapeutic and legal in origin. Local regulations begin to appear, but concern is only moderate. Little moral stigma is attached to such use. The second pattern is opium smoking among the Chinese, which is linked to crime and highly stigmatized, resulting in the ban on smoking opium imports (1887). In the 1890's the first state antimorphine laws appear. By 1896 opium imports have peaked and are subsiding.

1875-1900 *(cont'd)*

TOBACCO

United States. The cigarette industry undertakes a major advertising campaign and forms a cartel. Sales increase rapidly, prompting growing opposition, led by the WCTU.

1900-1925

ALCOHOL

Finland. Prohibition is enacted (1917), but quickly fails as illicit distribution overburdens police and smuggling becomes widespread (1919-1920).

Sweden. The Gothenburg system is made obligatory in cities (1905), but soon there begins criticism of the system's loopholes and its failure to limit temperance. Many local authorities become financially dependent on the system's profits and therefore encourage sales. A prohibition movement develops (1909), and the system is finally replaced by the Bratt system of monopoly sales rationing based on the use of a pass book (1917).

United States. The Anti-Saloon League grows in strength, concentrating on the election of drys to Congress; a third wave of state prohibition legislation occurs (1907-1917). Most within the temperance movement abandon broad reformist concerns to focus solely on the issue of alcohol prohibition. World War I assists in increasing the call for reform, and in January 1919 the 18th Amendment is ratified, establishing national Prohibition one year later. The possession of alcohol for personal use is still permitted; enforcement authorizations are kept minimal and left to the states. At first, consumption declines.

CANNABIS

Jamaica. Concern grows among the white land-owning population over ganja smoking among poor native laborers and its demoralizing, criminogenic influence. The Dangerous Drugs Law of 1924 increases penalities for use of opium or ganja.

United States. Marihuana smoking appears among Mexican laborers in towns along the Mexican border, and spreads along the Gulf Coast. Between 1914-1931, 29 states, most west of the Mississipi, prohibit its nonmedical use. In 1915, the U.S. prohibits its import for nonmedical purposes. Still there is only limited national concern.

COCAINE

General. Mortimer publishes Peru: History of Coca (1901), summing up the favorable medical opinion of the day.

Britain. Concerns over the supplying of cocaine to soldiers by prostitutes contribute to the passage of the Defense of the Realm Act (1916).

United States. Fears increase over unregulated sales and use; a dramatic rise in coca imports occurs. Under pressure, Coca-Cola manufacturers remove cocaine from their product in 1903. In 1906, the Pure Food and Drug Act effectively eliminates cocaine and opium from all patent medicines and soft drinks by requiring accurate labeling, marking the end of free and easy use. Use is increasingly identified with blacks, the poor, and criminals. By 1914, such fears over cocaine use, particularly by blacks, prompt 46 state regulatory laws to be passed, whereas only 29 states have laws against opiates. In 1914, the Harrison Act treats cocaine as more dangerous than opium, classifying it incorrectly as a narcotic. Cocaine subsequently goes underground, primarily used by bohemians and musicians, and in urban ghettos.

COFFEE

United States. Dr. T.D. Crothers, reflecting the considerable medical opposition to coffee use, classifies coffee addiction with morphinism and alcoholism (Morphinism and Narcomanias from other Drugs, 1902). A prominent British medical textbook (A System of Medicine, ed. Allbutt and Rolleston, 1909), similarly attacks all caffeine drinks, while finding opium as used in many oriental countries "a reasonable aid in the work of life."

1900-1925 *(cont'd)*

ETHER

Ireland. Localized use continues, as ether is still freely available from pharmacists. Some clandestine trade also develops. The Intoxicating Liquor Act of 1923 increases restrictions on sales and makes ether drinking an offense. Use seems little affected. In 1927, further restrictions permit registered sales only to doctors; afterwards both sales and use decline. This decline may have been assisted by cheaper and more available alcohol, and by a rise in incomes.

United States. During Prohibition, nonalcoholic "near beer" and soft drinks are frequently spiked with ether.

OPIATES

General. Antiopium sentiments peak. The opium problem is discussed at a series of international commissions, beginning in Shanghai (1909) and the Hague (1911-1912).

Britain. Facing stiff domestic and international opposition, the government decides to end the opium trade with China (1906), which finally concludes in 1917. The Pharmacy Act of 1908 places opium on the Schedule of Poisons and in 1916 the Defense of the Realm Act, put into effect primarily to curb military and domestic use of cocaine, also extends controls over opium. The Dangerous Drug Act of 1920 attempts to implement the 1912 Hague Convention and restricts opiate distribution to medical channels, at the same time affirming the doctor's right to possess and supply controlled drugs while providing medical care. In 1924, the Rolleston Committee emphasizes that nontherapeutic opiate use is not a serious threat, and after assessing the U.S. situation after the Harrison Act again affirms the legal right of physicians to prescribe opiates.

China. The dowager empress enforces strict opiate regulation and in agreement with the British ends the opium trade by 1917.

India. Criticism of use mounts. The All-India Congress Committee and Mohandes Ghandi pass a resolution that the British opium policy is contrary to the moral welfare of the Indian people (1924).

United States. Opiate addiction becomes increasingly identified with the underworld and organized crime. Fears over widespread use continue but there is also general confidence that addiction is curable. U.S. acquisition of Philippines (1898) and its central role in calling for the Shanghai Opium Conference (1909) focuses attention on the lack of opiate legislation in the U.S. In 1906 the Pure Food and Drug Act requires accurate listing on labels of all drugs used in over-the-counter preparations, producing a sharp decline in their use. In 1909, import of all opium for smoking or nonmedical use is banned; by 1914, 27 state and city laws prohibit smoking opium. Also in 1914, Congress passes the Harrison Act. Ostensibly a tax measure designed to control the marketing of opium, it requires all persons authorized to handle or manufacture narcotic drugs to register, pay a fee, and keep a record of the drugs in their possession. The act does not prohibit the supply of opiates to users by registered physicians "in the course of their professional practice." Subsequent Supreme Court decisions and government enforcement policies restrict the right of doctors to prescribe opiates. As early as 1919, a rise in heroin use is reported among urban male youths, prompting a ban of its manufacture and import (1924). By the end of this period, the fear of the "dope fiend" is firmly established.

TOBACCO

United States. Fourteen states ban cigarettes, others pass strict use regulations. Taxes increase and the tobacco cartel is broken up by the government. Use momentarily declines, but then the first modern or mild cigarette (Camels) is introduced and new advertising campaigns begin. Public acceptance grows, particularly among women. By 1927, tobacco prohibitions have been rescinded in all states, replaced by taxation.

1925-1950

ALCOHOL

Finland. Prohibition is repealed by referendum (1932); and a State Alcohol Monopoly is established to manage the production, distribution, and sale of alcoholic beverages through passbooks and buyer surveillance. Price controls attempt to encourage use of "mild" beers and wine over spirits. Retail sales are still banned in rural areas.

Sweden. Use declines and prohibition is voted down (1922), but the Bratt system begins to be criticized for high operating costs and for permitting too much consumption (1938).

United States. By 1925, a widespread illicit liquor trade is well established; speakeasies appear and consumption increases, particularly among women. The Wickersham Commission (1931) acknowledges widespread flouting of prohibition and lack of adequate enforcement machinery and funds. Increased enforcement and penalties have little effect; the Depression further strengthens repeal sentiment. In 1932, both the Democratic and Republic Conventions oppose prohibition, which is finally repealed in 1933.

CANNABIS

Jamaica. Depression, the rise of Rastafarianism, and racial fears increase concern over use. In 1941, penalties are increased for possession, sales, and cultivation; mandatory imprisonment is decreed for the first time. Following World War II, use becomes a major topic of police and public concern; penalties for possession and use are again increased.

United States. The Panama Canal Zone Report (1925, reaffirmed 1933) concludes there is no evidence that cannabis is habit forming or that it has any "appreciably deleterious influence" on users and recommends that no action be taken to prohibit its use by American soldiers in the Zone. But reports associating horrible crimes, marihuana, and Mexicans, continue to circulate and are given credence by a 1929 Surgeon General's Report. During the Depression, racial antagonisms and concern over marihuana-related crime increase the calls for federal marihuana legislation in the Southwest. After at first downplaying the menace and resisting this pressure, the FBN begins to emphasize the need for adoption of the Uniform State Narcotic Drug Act to control marihuana, "the worst evil of all," inaugurating a period of focused attention on the marihuana-crime thesis (1933). In 1937, the Marihuana Tax Act is passed establishing a prohibitive tax and regulatory procedures. In 1944, the La Guardia Report stresses the relative triviality of marihuana's effects.

COFFEE

United States. During Prohibition, coffee consumption reaches new heights.

OPIATES

Britain. The Rolleston Act (1926) gives doctors the right to prescribe narcotics on their own judgment; the act becomes the primary basis of narcotics legislation until 1967. The use of opium and cocaine declines; very little press or parliamentary interest in drug use occurs; few cases of nonmedical addiction are known.

India. The period 1920-1940 shows the greatest decline in use. As the Indian National Congress comes to power in some provinces, it begins to prohibit local use. The British government asserts its desire to stop nonmedical use in the future, and prohibits opium smoking (1946). In 1947, India achieves independence; the government inaugurates a policy to totally prohibit all opium production except for medical and scientific use within 10 years.

United States. Whereas during Prohibition the possession of alcohol for personal use is never made illegal, during the same period criminal sanctions are effectively extended against all users of "narcotics." The view grows that whereas alcohol can be used safely and in moderation, narcotic use inevitably results in dependence, insanity, death, and a criminal, immoral lifestyle. Public opinion abandons the 19th century view of opiate dependency as simply a misfortune as fear of the "dope fiend" spreads. Changes occur in

1925-1950 *(cont'd)*

OPIATES (cont'd)

the drug of choice and user demography. A cohesive drug subculture emerges, the typical member being a younger, urban, male heroin user, who uses the drug for pleasure and obtains it illicitly.

STIMULANTS

General. The effectiveness of amphetamine (first synthesized in 1887) in raising blood pressure, enlarging nasal and bronchial passages, and stimulating the central nervous system first becomes apparent. It is widely employed during World War II to help increase efficiency in industries and in the military. Following the war, use spreads as it is readily available and widely marketed as a safe euphoriant, mental energizer, and cure-all for such problems as depression, fatigue, and weight reduction. The hazards of use only become apparent later.

Japan. Widespread oral use of methamphetamine occurs as vast military stocks of the drug are released on the market following World War II and the drug is advertised as a safe panacea. Use is assisted by the spiritual collapse of the people, social and economic dislocation, poverty, and the undermining of traditional authority structures and values. In 1949, use is restricted to cases under a doctor's prescription; an illicit market develops and intravenous use begins to spread among bohemians, novelists, artists, and entertainers.

Sweden. In 1938, amphetamines are placed on the market and widely advertised as pep pills. In 1939, they are made available through prescription only as therapeutic use becomes widespread; but little recreational abuse is apparent. Concern over therapeutic use grows, and further restrictions are established under the Swedish Narcotic Act (1944). In the late 1940's, there develops a black market and a bohemian drug subculture which practices nonmedical oral use.

TOBACCO

United States. Both taxation and use continue to increase; early health warnings appear.

1950-1975

ALCOHOL

Finland. Following the repeal of prohibition, the temperance movement remains strong, with government support. The abolition of prohibition in rural areas and the lifting of beer restrictions produces an increase in consumption (1969).

Sweden. As criticism mounts, the Bratt system is abolished (1955); liberalization is followed by increased consumption, which is finally decreased by higher price controls (1958).

CANNABIS

Jamaica. Jamaica gains independence (1961) and penalties are increased for growing, selling, and dealing in ganja in 1961, 1964, 1972, and 1974, with little effect.

OPIATES

Britain. The first Brain Committee reviews and reaffirms the Rolleston findings (1958-1960), but following this report, nonmedical heroin use begins to become more apparent among young, urban males. In 1965, the second Brain Committee recommends increased controls, including a system of addict notification, the establishment of special treatment centers which would seek to rehabilitate and not just maintain drug users, and the restriction of heroin supplies to the centers. These recommendations are put into effect with the Dangerous Drug Act of 1968.

OPIATES (cont'd)

India. Control of cultivation and manufacturing passes to the new government. Through the use of licenses the area under cultivation is reduced about 25% and the number of cultivators by 60%. Cash incentives to cultivators help reduce diversions into an illicit market and the production process is strictly regulated. In 1959, sale and use is totally prohibited, except for medical purposes. Between 1963-1970 use declines markedly.

STIMULANTS

Japan. Intravenous use spreads, principally among economically marginal and delinquent youths. The Awakening Drug Control Law (1951) is passed. Widespread oral and intravenous use continues among urban populations, peaking in 1954, when heroin use also begins to increase. The Awakening Drug Law and police and educational efforts are strengthened (1955) and amphetamine use begins to decline. However, use of heroin and hypnotics increases during the 1960's.

Sweden. Oral abuse spreads from bohemian circles to maladjusted and criminal urban youths, and intravenous abuse becomes endemic (1950-1954). Tighter restrictions cause a shift to use of Preludin and Ritalin, mostly by injection. These drugs are also placed on the National Narcotics List. The Narcotic Drug Act (1962) increases imprisonment penalties and police activities, and the number of prescription violations declines. Criticism of the restrictive drug policy results in a liberalized prescripton policy (1965-1967), during which large supplies of amphetamine become available due to the excessive prescriptions of a few physicians and the epidemic peaks. Restrictions are reimposed (1967) and then made even more strict (1969). Use continues, but stabilizes.

TOBACCO

United States. The Surgeon General's Report (1964) causes a momentary decline in use, but despite health warnings and advertising bans, use begins to increase again in the 1970's.

Perspectives

1

Tobacco
England
1560-1625

BACKGROUND

The spread of tobacco use from the New World to the Old World gave rise to the first great drug controversy of global dimensions. From the onset, opinions regarding tobacco radically differed, in part because early reports praised its medicinal virtues but also described it as a harmful and destructive plant used in pagan religions. Tobacco was credited with almost miraculous healing powers, used by Indians as a remedy for aches and pains, snake-bite, abdominal and heart pains, chills, convulsions, epilepsy, skin diseases, fatigue, hunger, and thirst, among other ailments. The enthusiam for tobacco as a medicine was further assisted by the traditional European use of smoke to clear the head of moisture for asthmatic and catarrhal conditions. While smoking for pleasure was frowned upon by many, its use as a medicine was almost universally approved, with doctors leading the way in extolling the virtues of this *herba panacea*, this holy healing herb (*santa sancta*), this special remedy sent by God to man, this plant of "singular and divine virtues." On the other hand, the antagonism toward tocacco, particularly its use for pleasure or sport, was accentuated by reports that it was employed in the magic and religion of the Indians and that its use produced frenzy, stupefaction, near-delirium, and trance states. It therefore was attacked as a plant with the power of evil, the invention of the devil (7:17-39; 139-60)

The rapid spread of tobacco use throughout Europe and the rest of the world and the intensity of the antagonism toward it is one of the most remarkable and least known chapters in the history of substance use, and one of the best examples of the principle of multiple causation. One of the earliest and most dramatic conflicts occurred in late 16th- and early 17th-century England during the reign of King James I, an ardent antitobacconist. The conflict in England was more bitter than in other Western European countries, though less so than in the East. Nevertheless, the events in England are typical of what occurred elsewhere: the rise of a belief in tobacco's health-giving properties, and the role of the plague in spreading its use; the rapidity with which it became a fad among the aristocracy and upper classes; the influence of political and social concerns, as well as health concerns, on governmental control attempts; the failure of admonitions, prohibitions, and taxes to end use; and, finally, the growth of governmental dependence upon tobacco duties for revenue and the gradual acceptance, even encouragement, of its use.

CHRONOLOGY

c. 1560	INTRODUCTION	Tobacco is first introduced in Europe and, a few years later, into England. There is some dispute as to who first introduced the plant, but all agree it was brought from America by sea captains. John Hawkins is said to have introduced *Nicotiana rustica* from Florida in 1565, but no use occurred. The first attempts at cultivation occur in 1571. After Sir Francis Drake brings over *Nicotiana tabacum* in 1573, the first diffusion of smoking occurs. (1:4-9; 2:25-8; 3:68; 9:89).
c. 1573-	USE SPREADS	Pipe smoking becomes a national recreation. Sir Walter Raleigh makes the habit fashionable at court and in polite society; use spreads among all classes of Elizabethan society and among women as well as men. To acquire the art of smoking becomes the duty of every man of fashion; it is a disgrace not to be able to inhale smoke (1:33-4; 2:31; 3:73-5; 5;60-8; 7:155). Demand vastly outstripping supply, a lb. of tobacco becomes worth its weight in silver.
1577	PRO-TOBACCO WRITINGS	The first detailed account of tobacco in England is published: John Frampton's *Joyfull News Oute of the Newe Founde Worlde*, a translation of Nicolas Monardes' 3-part study of new world plants originally written in

CHRONOLOGY (Cont'd.)

		1574). Recommending tobacco as an infallible cure for 36 different maladies, Monardes' work becomes the fundamental source for all pro-tobacco literature of the 17th century (12).
1580-1600		Numerous publications discuss tobacco's discovery, cultivation, and medicinal uses: Holingshed's Chronicles (1586), Everard's Panacea (1587), Hariot's Virginia (1588), etc. Literary works, such as Spenser's Faerie Queene (1590) and Lilly's Woman in the Moone (1597), praise tobacco's healing qualities. Spenser mentions "divine tobacco" as one of the herbs used to stop the blood flow from wounds (6; 7; 1:22-4).
c. 1598		Earliest literary reference to tobacco as an anodyne or comforter to the unhappy soul appears in a poem from the exiled earl of Essex to Queen Elizabeth (6:6; 7:198).
c. 1600	ANTI-TOBACCO WRITINGS	The opponents of tobacco use react both to the exorbitant claims made for its medical virtues and to the excesses of recreational smoking by fashionable dandies. One of the earliest attacks on the dandies is Buttes' Dyets Dry Dinner (1599); Ben Jonson also ridicules them in Every Man out of his Humour (1596). In 1602, the Worke for Chimney Sweepers, a pamphlet written by an anonymous author calling himself Philaretes, presents several arguments to prove that smoking is depraved and immoral (4:39). Roger Marbecke also writes A Defense of Tobacco in the same year.
1603	KING JAMES I	James Stuart becomes king of England; cultivation of tobacco in England is common (10:329).
1604	JAMES ATTACKS TOBACCO	King James, fanatically opposed to smoking, publishes anonymously the most famous of all tracts condemning tobacco: A Counterblaste to Tobacco (13). James opposes smoking from motives of racial and national pride, refutes its medicinal virtues, castigates it as morally sinful (the "lively image and pattern of hell"), and a waste of national wealth (1:26-9; 3:76-83). James may have been partly motivated by his hatred of Raleigh (4:40).
	DEBATES	King attends and participates in debates on the uses of tobacco at Oxford University (3:84-8).
	TAX INCREASE	In order to discourage the tobacco trade from Virginia and the tobacco habit itself, James raises the duty from 2d. to 6s.10d, an increase of 4,000%. This is possibly the first attempt of its kind to get rid of a drug by indirect prohibition (4:41; 5:55-6).
1605+	USE CONTINUES; SMUGGLING	Tobacco smoking continues, activities of smugglers increase, and domestic cultivation intensifies.
1608	MONOPOLY TRADE LEASES	To counteract smuggling and to help raise much-needed money, James reduces the duty to 1s. per pound and sells the right to collect it.
	TRADE INCREASES	Tobacco imports rise rapidly and provide substantial revenues. Smoking continues.
1610	USE SPREADS	Francis Bacon writes, "The use of tobacco is growing greatly and conquers men with a certain secret pleasure, so that those

CHRONOLOGY (Cont'd.)

		who have once become accustomed thereto can later hardly be restrained therefrom" (1:16; 3:16). While tobacco opponents castigate its use for recreational purposes, tobacco is still used medicinally. John Gardiner, in the Trial of Tobacco, defends its curative powers while condemning smoking as a habit: "Many a young nobleman's estate is altogether spent and scattered to nothing in smoke. This befalls in a shameful and beastly fashion, in that a man's estate runs out through his nose, and he wastes whole days, even years, in drinking of tobacco; men smoke even in bed" (3:89).
1614	PLAGUE: USE SPREADS	An outbreak of the plague in London popularizes smoking: doctors declare that steady smokers are less subject to infection than others and recommend tobacco as a disinfectant, as in William Barclay's Nepenthes; or the Vertues of Tobacco (1:32; 3:89-90). 7,000 shops are now selling tobacco in London; despite high prices, use spreads among the poor (1:16).
	TOBACCO ATTACKED	The king's antipathy and his polemic give rise to a host of other anti-tobacco tracts. Sylvester's poem Tobacco Battered and the Pipes Shattered (1614) and Deacon's Tobacco Tortured (1618), reflect the moral fervor and hysteria of ardent reformers (6:9; 1:32-3).
1615	MONOPOLY RESOLD	Tobacco imports have risen so rapidly, James revokes his 1608 monopoly grant and farms out the duty at a higher price. For the remainder of his reign, solvency becomes an essential consideration in his tobacco control; James attempts to keep the duty as high as possible without causing importers to switch to smuggling (4:43). James is also motivated by desires to support the colonies (10:331).
1619	QUALITY CONTROLS	James proclaims the examination of all retail tobacco in order to curb adulteration and subsequent loss of revenue.
1619-20	FARMING RESTRICTIONS	Strict prohibitions against domestic cultivation of tobacco are enacted (10:331).
1620	MONOPOLIES CONTINUE	Tobacco trade increases: 40,000 lbs. of leaf enter from Virginia; concessionaires pay $16,000 annually. James orders that all tobacco must bear the government seal (3:93; 5:86).
	CONTROLS FAIL	Government policy produces frequent reversions of patents, voiding of monopolies, favoritism, and graft; opposition at home and from the planters in Virginia increases.
1624	TRADE RESTRICTED; ROYAL MONOPOLY	Tobacco becomes a royal monopoly; importing tobacco from Spain and Portugal is prohibited; only that from Virginia is permitted (2:53).
1625	USE SPREADS	By the last year of James' reign, tobacco is no longer as widely used medicinally and is regarded primarily as a pastime and pleasure (1:35). Tobacco use increases yearly despite all the policies designed to restrict it; James, admitting partial defeat, has come to see that regulating tobacco and encouraging colonial trade might be in his own best interest (1:35; 2:81).
	KING CHARLES I	Charles I ascends the throne and continues the policies of his father. Though expressing disapproval of the habit of smoking, he needs to increase his revenues; accordingly,

CHRONOLOGY (Cont'd.)

		he strengthens the royal monopoly, restricts foreign imports, prohibits domestic cultivation, and fosters tobacco trade with the colonies.
1630's	SMOKING MORE ACCEPTED	It becomes clear that smoking will overcome all opposition; the literature of the 1630's and 1640's reflects this change in public opinion.

COMMENTARIES

Moral antipathy and the taxation of tobacco -- Brooks, The Mighty Leaf (1952), p. 84.

> "The nature of the commodity represented by tobacco (and its associations) made it a most favorable article for sumptuary taxation. This official attitude, early expressed, was to become the basis of an almost immutable rule in the treasury departments of European and Asiatic governments. Tobacco was, at first, regarded as a nonessential article and an expensive luxury which should, in all justice, be heavily taxed. Indeed, the original levy imposed on it in England was dictated by righteousness rather than fiscal necessity. Moral antipathy to its use was to linger for many decades."

Tobacco's popularity -- Blum, et al., Society and Drugs (1969), p. 92.

> "Scholars present many factors to account for the tobacco 'epidemic.' Laufer (1924) argues that there was no prior resistance anywhere on grounds of convention, religion, morality, or law simply because neither the substance nor the technique was known. Both were completely new and there were no direct arguments against innovation. In Europe, furthermore, it was an era of exploitation and discovery and popular heroes--men like Sir Francis Drake--were copied as they brought back the wondrous treasures of new worlds. Laufer argues further that the smoke itself suggested fire, dragons, and deviltry, making it a status symbol in the post-Reformation era. Generally, diffusion proceeded from those with prestige to those with less prestige; in other words, the people copied smoking from those they admired."

The failure of King James' policies -- Corti, History of Smoking (1931), pp. 83-84.

> "[The] denunciation from the throne made an enormous impression throughout the kingdom, but its results were not at all what the monarch had looked for. The practice had already taken too strong a hold on the people, and the devotees of smoking were prepared to risk the royal displeasure rather than give up their newly acquired luxury; besides, it was possible to indulge in the habit without making a parade of it. Everyone read the pamphlet; flatterers and parasites praised it, though here and there a feeble protest was made; but things went on just as before, and the consumption of tobacco from Virginia soared to undreamed-of heights. Angry that his subjects should pay so little heed to his well-meant admonition, the king resolved to compel their obedience by an inroad on their purses; accordingly he commanded that the duty on tobacco should be raised, but, owing to the opposition in Parliament, the measure was never enforced...
>
> "As a result of the king's attitude, less tobacco was imported, while the cultivation of the plant in England increased enormously; tobacco had in truth become so indispensable to the people that every repressive measure on the part of the king was met by them with a countermanoeuvre which generally succeeded in making the latest order of no effect."

The roots of the English tobacco controversy and the failure of King James' policies -- Inglis, Forbidden Game (1975), pp. 37-42.

> "Tobacco caught on not because it induced a trance state, and visions. Young Englishmen of the time would have been terrified if it had. They took to the drug simply because it was fashionable and--as soon as they got over the initial reaction of giddiness or nausea--enjoyable. It provided a mild 'lift,' when that was desired; or it assisted relaxation...

COMMENTARIES (Cont'd.)

"Smoking happened to become fashionable in England at a time when Puritanism was also establishing itself, based on an ethic closer to that of John the Baptist than of Jesus. The Puritan was not then in a position to deny tobacco's medicinal virtues, but it did not escape him that the people who smoked it were rarely concerned for their health. It was consequently possible to argue that because tobacco 'drinking' (as it was then often described in the sense of drinking it all in) was not confined to specific doses at certain times of day, it could actually be harmful--like other drugs whose dosage was inadequately regulated: particularly to the young. Here the Puritan found allies in the nobility and gentry who, even if they themselves liked to smoke, were apt to be indignant when their sons insisted on following the fashion" (pp. 38-39).

"[King James' 1904 import duty] was the first attempt of its kind to get rid of a drug by indirect prohibition--by imposing a tax so heavy that only the very rich would be able to afford to buy it. And this discrimination was deliberate. When tobacco had been discovered, the preamble [to the law] recalled, it had been taken 'by the better sort,' only as a physic. But it had recently, 'through evil custom and the toleration thereof, been taken in excess by a number of riotous and disorderly persons of mean and base conditon who, contrary to the usages of which persons of good calling and quality make, spend most of their time in idle vanity, to the evil example and corruption of others.' 'They also spent too much of their wages, which they ought to be spending on their families, 'not caring at what price they buy'; so that people's health was being impaired, making them unfit for work, and consuming their resources, and also the country's because 'a great part of the treasure of our land is spent exhausted by this drug alone.' James, in other words, had been moved to action less because of the drug's effect on his subject's health, than because it might make them less loyal and hard-working. Men who took time off to smoke could be expected to expend much of that time in talk; and the talk might turn to gunpowder, treason and plot...

"To judge by the Counterblast, James would have preferred to ban tobacco outright; but that could possibly have been dangerous, with so many pipe-smokers among the Court circle; and it would certainly have been difficult, with tobacco in such demand as a medicine. So the intention--the preamble continued--was simply to provide a restaint on consumption, in order to reduce the amount being imported, while leaving 'sufficient store to serve for the necessary use of those who are of the better sort, and have and will use the same with moderation to preserve their health.' But the new duty, James soon found, had precisely the opposite effect to that which he had intended. The people who used tobacco to cure ailments, finding it so expensive, were forced back on older herbal remedies which cost little or nothing. Those who had begun to smoke for pleasure, however, and become addicted could not bear to do without their pipefuls. And although with so heavy a duty to be paid, merchants did indeed, as James had hoped, find it less profitable to import tobacco, this only meant that they found it more profitable to smuggle it.

The London tobacco scene -- Arents, Early Literature of Tobacco (1938), pp. 6-7.

For sheer dramatic and comedy value, the most diverting scenes in the history of tobacco took place in and around London at the end of the 16th century. The most readable part of the English literature on tobacco developed during this period. It would be difficult to give you a clear picture of what was going on there without some comment on the special background of the new fashion of smoking. First we must remember that the tobacco trade was almost entirely in the hands of the Spanish; and as England and Spain were often at war, the prices of this smoking commodity sometimes went skyrocketing...As the ratio of money value between Elizabethan times and our own was approximately six to one, this made the cost of the best tobacco of 1599 more than $120 a pound! This "divine herb" being so expensive, it was smoked in pipes with very small bowls. This form of smoking was most common, but sometimes a crude kind of cigar was seen among the more hardened smokers. At the end of the 16th century, London was infested with strutting, affected dandies, and these gallants adopted smoking as something especially devised for them. Their extravagances in this art, the elaborate smoking equipment they carried about with them, and their insolent claim that only they knew the correct method of smoking made them the butt of many literateurs."

COMMENTARIES (Cont'd.)

"Lively image and pattern of hell" -- James I, Counterblast to Tobacco, 1604.

> "And now good Countrey men let us (I pray you) consider, what honour or policie can move us to imitate the barbarous and beastly manners of the wild, godlesse, and slavish Indians, especially in so vile and stinking a custome? Shall we ...that have bene so long civill and walthy in Peace, famous and invincible in Warre, fortunate in both,...shall we, I say, without blushing, abuse ourselves so farre, as to imitate these beastly Indians?...Why doe we not as well imitate them in walking naked as they doe?...yea why do we not denie God and adore the Devill as they doe?...
>
> "And what greater absurditie can there bee, then to say that one cure shall serve for divers, nay, contrarious sortes of diseases? It is an undoubted ground among all Phisicians, that there is almost no sort either of nourishment or medicine, that hath not some thing in it disagreeable to some part of mans bodie...whereby the contrarie in this case, such is the miraculous omnipotencie of our strong tasted Tobacco, as it cures all sorts of diseases...
>
> "Thirdly, is it the greatest sinne of all, that you people of all sortes of this kingdome, who are created and ordained by God to bestowe both your persons and goods for the maintenance both of the honour and safetie of your king and commonwealth, should disable yourselves in both?...
>
> "Now how you are by this custome disabled in your goods, let the Gentry of this land beare witnesse, some of them bestowing three, some foure hundred pounds a yeere upon this precious stinke, which I am sure might be bestowed upon many farre better uses....And for the vanities committed in this filthie custome, is it not both great vanitie and uncleanenesse, that at the table, a place of respect, of cleanlinesse, of modestie, men should not be ashamed, to sit tossing of Tobacco pipes, and puffing of the smoke of Tobacco one to another, making the filthy smoke and stinke thereof, to exhale athwart the dishes, and infect the aire, when very often men that abhorre it are at their repast...
>
> "Have you not reason then to bee ashamed, and to forebeare this filthie noveltie, so basely grounded, so foolishly received and so grossely mistaken in the right use thereof? In your abuse thereof sinning against God, harming your selves both in persons and goods and raking also thereby the markes and notes of vanitie upon you: by the custome thereof making your selves to be wondered at by all forraine civil Nations, and by all strangers that come among you, to be scorned and contemned. A custome lothsome to the eye, hatefull to the nose, harmefull to the braine, dangerous to the Lungs, and in the black stinking fume thereof, neerest resembling the horrible Stigian smoke of the pit that is bottomelesse.

Commissio pro Tobacco -- James I, 1604; as quoted in Bewley, Smoking: The 16th and 17th century response, Int. J. Add. (1973), pp. 193-194.

> "Whereas tobacco being a drug of late years found out and by merchants as well as strangers, brought from foreign parts in small quantity into this Realm of England and our other dominions, was used and taken by the better sort, both then and now only as physic to preserve health and is now at this day through evil custom and the toleration thereof, excessively taken by a number of riotous and disordered persons of mean and base condition, who contrary to the use which persons of good calling and quality make therof, do spend most of their time in that idle vanity to the evil example and corrupting of others and also do consume that wages which many of them get by their labour, and wherewith their families should be relieved, not caring at what price they buy their drug, but rather devising how to add to it other mixture, thereby to make it the more delightful to their taste, though so much the more costly to their purse; by which great and immoderate taking of tobacco, the health of a great number of people is impaired and their bodies weakened and made unfit for labour. The estates of many mean persons so decayed and consumed as they are thereby driven to unthrifty shifts, only to maintain their gluttonous exercise thereof. Besides that also a great part of the treasure of our land is spent and exhausted by this only drug, so licentiously abused by the meaner sort, all of which enormous inconvenience ensuing whereupon we do well perceive to proceed principly from the great quantity of tobacco daily brought into this our realm of England and dominions of Wales, from the parts beyond the seas, by merchants and others which excess we conceive might in great part be restrained by some good imposition to be laid upon it, whereby it is likely that a less

COMMENTARIES (Cont'd.)

> quantity of tobacco will hereafter be brought into this our realm of England etc., than in former times and yet sufficient store to serve for their necessary use who are of the better sort and have and will use the same with moderation to preserve their health."

Herba panacea -- Monardes, Primera y segunda y tercera partes de la historia medicinal de las cosas que se traen de neustras Indias Occidentales que sirven en medicena, 1574, as quoted in Dickson, Panacea or Precious Bane (1954), pp. 84-88.

> "This plant, which is commonly called tobacco, is a very ancient herb and known among the Indians, especially those of New Spain. After these lands were conquered by our Spaniards they, being taught by the Indians, made use of it in wounds suffered in war, curing themselves with it, to the great benefit of all. It was brought to spain a few years ago, more to adorn gardens with its beautiful appearance than for the marvelous medical virtues which it has; now we use it more for these virtues than for its beauty, for they are certainly such as to attract admiration....its quality is hot and dry in the second degree. It has the virtue of heating and dissolving, with some astringency and invigoration; it glues together and closes up fresh wounds, so they say, at the first application. It cleans and purifies infected sores and brings them to perfect health, as we shall describe later. And now I shall speak of the virtues of this plant, and of the things which it is useful for, one after the other.

(Monardes proceeds to systematically list all the ailments which he says can be cured by either smoking, chewing, or drinking tobacco, or applying hot leaves or tobacco ointments onto the skin. Among these cures are: headaches, stiff necks, body pains caused by cold, asthma,, stomach pains and obstructions, bad breath, worms, painful joints, swellings and cold abscesses, toothaches, poisoning and wounds and sores, bleeding, and hunger, thirst or weakness. Within this discussion, he makes the following observations of its use by Indian priests and as an intoxicant.)

> One of the marvelous things about this plant, which excites the most wonderment, is the manner in which the Indian priests use it. When there is important business among the Indians and the caciques or chiefs of the villages think it necessary to consult with the priests, they go to them and state the problem. The priests, in their presence, take some leaves of the tobacco, throw them on the fire, and receive the smoke of it into their mouths or nostrils, by means of a cane. After taking it they fall down upon the ground as if dead, and remain thus, according to the amount of smoke they have taken. When the plant has done its work they recover and give answers, based on the visions and illusions they had while in the trance, and interpret as seems best to them, or as the devil advises them, always giving doubtful responses, so they can say, whatever happens, that this is the answer which was made. In like manner the rest of the Indians smoke tobacco for pastime, in order to become drunk and to see the visions...which they delight in. And at other times they take it to find out about their business, for they decide this in conformity with what they see when they are drunk. And as the devil is a deceiver and knows the virtues of herbs he showed them the value of this plant so that they might see imaginary things and fantasies which it reveals to them, and thus he deceives them...

Reasons for the acceptance of tobacco as a panacea -- Ortiz, Cuban Counterpoint (1947), pp. 242-244.

> "The doctors were the stoutest defenders of tobacco...unquestionably tobacco was discovered by Europeans in an epoch propitious toward receiving it as a panacea. The superstitious beliefs in miracles and magic of the middle ages had not yet disappeared, and the experimental curiosity of the Renaissance was just coming into flower, although it had not yet expressed itself in scientific formulae. And tobacco was at one and the same time a thing of wonder and a thing of science, a substance that attracted interest as much by reasons of its exotic mystery and semifabulous origin as by the strangeness of its workings and the unexplored field of it possible applications, all of which offered countless opportunities for experimentation to curious physicians and for the snares of charlatans and quacks. Moreover, in connection with the most usual methods of taking tobacco--that is, in smoke or in powder--the medicine of Europe in those days was greatly given to the provoking of

COMMENTARIES (Cont'd.)

sneezing and nasal irrigations and fumigations 'to clear the head'--caput pungia, it was called in Latin by the doctors."

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2

Tobacco
Italy and the Papacy
1560-1725

BACKGROUND

As in England, it was the court circles in Italy which first adopted and spread the fashion of tobacco smoking. Italy possessed a most sophisticated and worldly nobility and the most highly developed commercial society in all of Europe. Not surprisingly, the Renaissance Italians quickly grasped the financial benefits which could be derived from the new substance. The monopolistic techniques they developed set the standard for the rest of Europe and profoundly altered subsequent reactions to tobacco use; official interference would no longer be principally concerned with prohibitions, but rather with simply averting or minimizing the danger of fire, and maximizing profits.

The spread of tobacco use in Italy was also facilitated by prominent clerics who regarded tobacco as a medical plant of remarkable virtues. The papacy's repeated attempts to restrain tobacco use among the Italian and Spanish clergy is a dramatic illustration of the extent to which tobacco smoking had spread by the 1640's. However, even the papacy felt obliged to allow exceptions to its smoking ban, finally capitulating and forming its own monopoly.

CHRONOLOGY

1560-1565	INTRODUCTION	Prospero Santa Croce, papal nuncio, returning from his mission to the Portuguese court, gives some tobacco seeds to Pope Pius IV, and tells him of Jean Nicot's (see persp. 3) account of tobacco's healing properties. The seeds are planted in the Vatican gardens, and tobacco subsequently becomes known in Italy as herba Santa Croce (1:63-4; 2:56; 5:152).
		Around the same time, Nicolo Tornabuoni, papal nuncio and Tuscan ambassador to the court of France, informs Cosimo I de Medici, Grand Duke of Tuscany, of Nicot's new medicinal herb and sends some specimens to the Pisan botanist Cesalpinus, who names it herba Tornabuoni.
		Spanish, Portuguese and Italian sailors introduce tobacco smoking to the Italian ports. The first systematic attempt at cultivation begins in the Brenta valley outside Venice (1:64, 127).
1565		The first description of the tobacco plant in botanical literature appears in Pierandrea Mattioli's Commentarii di Dioscoridem (2:567).
1585		Castore Durante writes that tobacco was found in abundant quantity in Rome, thanks to Cardinal Santa Croce, and devotes a lengthy discussion to its virtues. There is no evidence that it is being widely smoked (2:56).
1610	USE APPEARS IN COURTS	Count Crescenzio acquires the art of smoking in England; upon his return he teaches the habit to the nobles and clergy of the Italian courts where smoking and snuffing are readily adopted. Tobacco is still little known among the masses in Italy (1:128; 2:57).

CHRONOLOGY (Cont'd)

1615-1625	USE SPREADS	Smoking spreads rapidly throughout the peninsula, with the nobility and the clergy setting the fashion. The example of sailors, and of the Spaniards who occupy much of Italy, spreads smoking even further (1:128).
	OPPOSITION	Opposition mounts among the literati who, while not averse to its moderate employment as a medicine, bitterly attack those who smoke to excess (1:134).
1626	TAXATION	Seeking profits, the Venetian Republic establishes a tax on imported tobacco; an example speedily followed by Mantua, Piedmont, and other areas. Venice becomes the most successful in profiting from the new habit (1:128, 151).
1627	MONOPOLY ESTABLISHED	Mantua grants the first tobacco monopoly, outside England, at a yearly rent of 16,900 lire, and forbids anyone else to import (3:105; 1:151).
1637		Government in Lombardy claims control of tobacco trade (1:151).
1642	CLERICAL PROHIBITION	Smoking has increased dramatically among the clergy in Spain and Italy. The habit is indulged in even in church and during Mass. Previous disapprovals and warnings from ecclesiastical superiors have been powerless to check the spread. The Diocese of Seville appeals to Pope Urban VIII to stop the practice. Urban issues the bull Ad futuram rei memoriam to punish offenders by immediate excommunication. However, a special clause exempting certain high personages which could be "dispensed at discretion" creates a loophole that leaves the bull ultimately ineffective (1:128-30; 3:126; 5:153-4).
1647		Duchess-Regent of Savoy grants tobacco monopoly in Piedmont (1:151).
1650	CLERICAL BAN REASSERTED	As clerical use continues, Urban's successor, Pope Innocent X, issues another bull forbidding tobacco use in St. Peter's basilica, under penalty of excommunication. But it provides for special exceptions, and has little effect (1:130-31).
	USE CONTINUES; CONFLICT IN CHURCH	Smoking and snuff-taking continue, even among clergy, some of whom argue that it is an aid in keeping the vow of chastity. Other clergy and men of letters continue to denounce the tobacco habit strongly. A bitter controversy develops within the church; some assert that smoking in church is a deadly sin and that tobacco is an invention of the devil. The ensuing protest forces an official pronouncement that using tobacco is not a sin, although "one ought not to do it" (1:132-4).
1651	CULTIVATION	Venice limits cultivation and sale of tobacco, granting certain communes, especially in the Brenta valley, the sole privilege of cultivation (1:151).
1655	PAPAL MONOPOLY ESTABLISHED	The commercial methods of northern Italy begin to be followed in the south. In Rome, Pope Alexander VII issues an edict forbidding the import and cultivation of tobacco, and farms out spirits and tobacco monopolies. Similar monopoly trans-

CHRONOLOGY (Cont'd)

		actions form one of the most considerable sources of revenue for the papal states (1:131, 152; 4:247).
1659	MONOPOLY STRENGTHENED: THE APPALTO	Venice founds the first tobacco appalto (a contract giving exclusive right to import, manufacture, or trade in tobacco to a private party in return for pay). This becomes a model monopoly imitated in most European states (1:151).
1660		Pope Alexander VII establishes a monopoly in Bologna (4:247).
c.1700	CONFLICTS SUBSIDE; SNUFF	Little opposition to the use of tobacco remains. By the beginning of the 18th century, everyone smokes--the lower classes using clay pipes; the upper classes, china pipes (1:187). Snuff-taking grows fashionable, spreading from France across Europe and almost completely supplanting smoking among the court, nobility, and clergy. The Italian Baruffaldi, noting the spread of snuff-taking in his country, calls tobacco "the food of the brain" (1:187). By now, Pope Innocent's 1650 bull is dead.
1725	CLERICAL BANS REPEALED	Pope Benedict XIII--himself a smoker and snuff-taker--repeals the former bull and permits the use of snuff in St. Peter's (Jan. 10, 1725). This repeal is taken in Europe as a general approval of snuff-taking (1:199-200).

COMMENTARIES

The Venetian monopoly (appalto) -- Corti, History of Smoking (1931), pp. 151-152.

> "The republic of Venice was most successful in profiting by the new habit. In 1626 it taxed tobacco, and in 1651 began to limit its cultivation and sale, while granting certain communes, especially in the Brenta valley, the privilege of growing tobacco. In 1659 was founded the first tobacco appalto, a contract whereby the exclusive right to import, manufacture, and trade in tobacco was farmed out to a private person for a certain consideration. The payment for a three years' lease of the monopoly at Venice was 8,000 ducats. Only the 'Seven Communes' were any longer allowed to grow tobacco, and they had to regulate their supply by the demand of the Venetian appalto. Their tobacco could be sold only to the appalto at Venice. This method became a model monopoly, imitated in most European states. Its brilliant financial results induced emperors and kings, nobles and clergy, feudal lords and governments of all sorts to raise their ban on tobacco, and in course of time to reverse their former policy; for the vast increase of smoking in later centuries, and the ever-rising revenues from tobacco taxes and monopolies, led governments to urge their subjects to consume more and more."

The spread of tobacco use among the court and clergy -- Corti, History of Smoking (1931), pp. 128-132.

> "Before the year 1615 smoking, in any form, was but little known among the masses in Italy, but in the next ten years it had spread like wildfire over all the land. At that time the nobles and the clergy set the fashion for all--their rule was absolute, what they did must be right, and the people followed them. That these two classes should be the first to adopt the new custom was only natural, for the new "herb" cost much money, and the home production could not as yet be made to pay....
>
> "Meanwhile the clergy both in Spain and Italy became so addicted to smoking, and later to snuff-taking, that they went even so far as to gratify their longing during the celebration of Mass. This naturally aroused the indignation of their non-smoking brothers as well as the laity, and led to drastic action on the part of certain of the bishops....

COMMENTARIES (Cont'd)

> "The truth is that the use of tobacco was never actually forbidden to Christianity at large, nor even in the churches in Rome, with the exception of St. Peter's. Yet how necessary such restrictions were is evident from an incident which had occurred somewhat earlier at Capocelere, in the Kingdom of Naples, and which roused the faithful to the highest pitch of indignation. One Sunday a priest who was celebrating Mass took a pinch of snuff just after receiving Holy Communion; the fit of sneezing that ensued caused him to vomit, and throw up the Blessed Sacrament on to the altar in sight of the congregation. This shows that snuff-taking had already taken a strong hold in Italy, where numbers had become enslaved to the habit."

Papal policies toward tobacco -- Ortiz, Cuban Counterpoint (1947), pp. 233-237.

> "In that first half of the sixteenth century neither in the parishes or convents of Spain nor in the see of Rome was there the austerity necessary to withstand the temptation of the 'evil plant,' as tobacco was termed by certain moralists. There were no papal decrees against tobacco ordering fasts or abstinence, as in the case of appetizing meats.
>
> "For this and other reasons the use of tobacco spread rapidly among the Spanish clergy, which gave itself over to the inhaling of its powder and smoke with an enjoyment more pagan than devout and, into the bargain, derived from its cultivation great profits, especially through the ecclesiastic tithes and the pious gifts from the small farmers. Notwithstanding, some measures were taken against tobacco by the Church, but rather to check certain abuses than to prevent its normal use. Smoking is not a sin, said the scholastics, but it may be, if carried to excess, just as gorging on some simple food to the point of sickening and dying of indigestion becomes the mortal sin of gluttony" (pp. 233-4).
>
> "It is evident, then, that the canonical measures against the use of tobacco boil down to mere recommendable rules of liturgical etiquette or simple ecclesiastical hygiene. It was not the Catholic clergy that fostered the animadversion against tobacco in Europe and America, as did the Protestants. The Holy Office, so unremitting in its pursuit of sorcery and the snares of Satan, took no action against tobacco" (p. 237).

Pope Urban VIII's antitobacco bull -- Urban VIII, Ad futuram rei memoriam, January 30, 1642, as quoted in Corti, History of Smoking, (1931), p. 129.

> "Whereas information has lately reached us from the dean and chapter of the metropolitan church in Sevilla that in those parts the use of the herbe commonly called tobacco has gained so strong a hold on persons of both sexes, yea, even priests and clerics, that--we blush to state--during the actual celebration of Holy Mass, they do not shrink from taking tobacco through the mouth or nostrils, thus soiling the altar linen and infecting the churches with its noxious fumes, sacrilegiously and to the great scandal of the pious...it therefore behooves us, in order to purge our churches of this shameless abuse, to prohibit and interdict all persons of either sex, clergy or laity, collectively and individually, from using tobacco or snuff in any form whatever in the churches of the said diocenes...and all persons thus offending shall be punished by immediate excommunication, ipso facto, without further ado, in accordance with the terms of the present interdict."

REFERENCES

(1) Corti, History of Smoking (1931), pp. 103-65, 127-134, 151-152, 187-200, 128-239.
(2) Laufer, Introduction of Tobacco into Europe (1924), pp. 8, 56-57.
(3) Brooks, The Mighty Leaf (1952), pp. 105, 126-128.
(4) Ortiz, Cuban Counterpoint (1947), pp. 233-237, 241, 247-249.
(5) Dickson, Tobacco and the church, in Panacea or Precious Bane (1954), pp. 139-162.

3

Tobacco
France
1559-1815

BACKGROUND

Tobacco was introduced into France around 1560 by the explorer André Thevet and, more prominently, Jean Nicot. As ambassador to the Portuguese court, Nicot became familiar with the plant and sent it as a gift to Catherine de Médicis, queen mother of France. Nicot and the court were the primary influences in France in the spread of knowledge about tobacco and its reputation for healing almost every complaint. It was in honor of Nicot that, in 1570, the plant was dubbed *Nicotiana* and the active ingredient was later called nicotine (1:49-52).

The history of tobacco in 17th and 18th century France illustrates a number of important trends characteristic of the period: the spread of snuffing, the decline of opposition to tobacco, the rise of dependence on it for revenues, and the spread of monopolies or *appaltos*. In the policy of Richelieu, Louis XIV, and Colbert, we see the development of a system of tax and trade monopolies similar to those of Italy. This policy toward tobacco was typical of government mercantilism aimed at making the country self-sufficient, in part by increasing the wealth from which taxes were drawn. The French monarchy was always in need of money because of its reliance on a system of indirect tax collection by private concessionaires or tax farmers and because of its inability to tax the wealthy. Therefore, it relied on methods for increasing taxable wealth, and trade and manufacture developed in France under more direct government guidance than in England. Tobacco was only one of many items for which tax monopolies were granted; the Five Great Farms were for salt, spirits, customs, market-tolls, and tobacco. However, tobacco quickly realized its place as an especially profitable source of revenue, and the most unpopular Farm (3:208).

Unlike James I of England, King Louis XIV never attacked tobacco, but his dislike was well known and tobacco was never used in his presence. But once tobacco use spread in France, for all his omnipotence, the *roi soleil* was powerless against its use, and once he discovered the rich returns that could be gained from the trade, he was more than willing to protect it. Because of popular hostility toward the tobacco monopoly, it was repealed during the French Revolution, but it was soon reinstated as a source of much-needed revenues. Evidently, the economics of tobacco were most seductive.

One of the major changes in the mode of tobacco use occurred in this period--the rise of snuff. It was in France that snuff-taking or snuffing first became fashionable; its appeal to the aristocracy and clergy played an important role in the spread of tobacco throughout Europe. It remained in vogue among the aristocracy in both France and England until the French Revolution. Thereafter its use dramatically declined, illustrating the changing nature of drug use patterns.

CHRONOLOGY

1559	INTRODUCTION	Jean Nicot sends tobacco as a medicinal to Queen Catherine de Médicis, who some claim popularized the use of snuff as a headache remedy (4:92). Originally pharmacists alone are authorized to sell tobacco on medical prescriptions (7:61).
1610-	LOUIS XIII: USE SPREADS	During the reign of Louis XIII (1610-43) smoking spreads among the lower classes; the court, nobility and clergy increasingly turn to snuff which most likely did not make its appearance until 1625 (4:92). Although the king gives it no encouragement, the habit grows (2:125-6; 3:149).
1629	TAXATION	Tobacco is costly, and the *tabagies* (smoking taverns) of Paris charge high prices, but the habit spreads. Cardinal Richelieu, the chief minister of France, personally objects to smoking.

CHRONOLOGY (Cont'd)

		He imposes a duty on imported tobacco as a check on the growing habit--and as a source of revenue, feeling that taxation would be more profitable than direct prohibition (3:149-50).
1630's	USE RESTRICTED	Authorities continue to disapprove of smoking, and isolated cases of prohibition occur. In 1634, a naval order forbids smoking after sundown.
1635	SALES RESTRICTED	Free sale of tobacco is interdicted by Louis XIII; the lieutenant of police forbids the sale of tobacco except by apothecaries upon presentation of a physician's prescription.
	RESTRICTION REMOVED	Sales restriction does not remain in force long, because of its negative effect on tobacco revenues (3:161).
1636	REVENUES RISE	Tobacco duty increases to 50,000 livres a year (3:150).
1643-	LOUIS XIV: USE SPREADS; OPPOSITION DECLINES	By the reign of Louis XIV (1643-1715), the tobacco habit is widespread and continues despite the king's personal dislike. The letters of the Princess Palatine Liselotte, Louis' daughter-in-law, describe the scenes at court and the nobles' efforts to hide their habit from Louis. Fagon, the king's physician, remains one of the few voices of dissent, attacking tobacco fiercely for shortening life. Most writers of the age extol its pleasures. Moliere (Don Juan, 1665) calls tobacco "the passion of all proper people"; Corneille (Le festin de Piere, 1677) writes that "tobacco is divine"; and the Marquis de Prade composes a panegyrical Histoire du tabac in 1677 (1:53-4; 3:166, 178-86).
1674	MONOPOLY ESTABLISHED	Louis and his minister, Colbert, imitate the tobacco monopolies of the Italian and Austrian states and issue an edict reserving for the king the privilege of manufacturing and selling tobacco, which he then farms out to contractors. The monopoly brings in 4,000,000 livres a year (3:169, 209).
1680-81	MONOPOLY SPREADS; SMUGGLING BEGINS	The monopoly develops into an organization of great efficiency under the tax-farmers and the elaborate regulation of Colbert. Repressive measures are enacted against rebels as frequent uprisings against the monopoly agents occur. Soldiers and sailors begin to smuggle tobacco from abroad; bribery, corruption, intimidation, and paid spying are some of the open concomitants of the system (2:107; 3:161, 184).
1688	RESTRICTION	Royal ordinance forbids soldiers to smoke any tobacco not acquired from the licensed shops.
c.1700	SNUFF SPREADS	Snuffing becomes extremely fashionable throughout Europe. While smoking continues among the lower classes, among the upper classes it has been almost entirely supplanted by snuff. In England, snuff is introduced by the courtiers who had been with Charles II in France; in Germany, snuff dealers and manufacturers come from France to Cologne, and Frederick the Great of Prussia, a great Francophile, spreads the French fashion of wearing and giving away fine snuff boxes. A large-scale industry develops in France to produce snuff and exquisite snuff boxes (3:188, 200; 2:129-130).

CHRONOLOGY (Cont'd)

	TRADE ENCOURAGED	The French export tobacco from Santo Domingo and Martinique, and begin to develop plantations in Louisiana. The French government officially supports and financially aids the development of tobacco farms in the colonies.
1782	AMERICAN TRADE	Money from snuffing and smoking helps the American colonies win their independence. Benjamin Franklin comes to France as an envoy and succeeds in getting money for the War on Independence from the Great Farms. He undertakes to deliver Virginia tobacco in return for the money (3:205-206; 2:181).
1785		Thomas Jefferson, American Minister to France, tries to improve Franco-American trade relations on behalf of the tobacco planters, but is defeated by the powerful French monopoly (2:182-3).
1791-3	MONOPOLY REPEALED	The French Revolution violently annuls the power of the tax-farmers. Former monopolists are arrested, denounced, and accused, among other things, of excessive watering of tobacco. On the whole, the barriers to the tobacco trade are swept away, and it is expected that tobacco will become less expensive. General disorder and insecurity affects the tobacco supply; tobacco becomes scarce and state revenues (which have amounted to 32,000,000 livres compared to 4,000,000 livres in 1629) decline. Various schemes for securing more revenues are advanced in the National Assembly. Mirabeau proposes maintaining the monopoly under state control; others call for free cultivation and manufacture. A compromise tax is instigated which proves insufficient (3:208-10).
1809	REVENUES DECLINE	Despite the continual raising of taxes and duties on tobacco, the revenue is only 14,000,000 francs.
1810	NAPOLEON REESTABLISHES MONOPOLY	Napoleon, needing huge sums of money for his continental wars, reestablishes the monopoly by imperial decree, declaring that tobacco can bear taxation better than other articles and, therefore, revenue would increase. (Although he considers smoking good only to occupy the idle, Napoleon is an ardent snuff-taker.) Direct control of the tobacco industry becomes the system in France, and its favorable monetary returns attract the attention of other governments. By 1845, tobacco revenues amount to 80,000,000 francs a year. The French system becomes the model for the regie system of the major European countries (2:185; 3:213).

COMMENTARIES

Tobacco as a revenue source -- Corti, History of Smoking (1931), pp. 149-150, 165-166.

> "During Louis XIII's reign a noteworthy change took place in the fortunes of tobacco in France. Smoking offended the taste of the upper circles, the Court, the nobility, and the clergy; it was considered hardly consistent with aristocratic dignity or feminine charm to be always puffing out tobacco smoke. Fashion favoured another way of enjoying the magic herb: snuff-taking was pronounced a far daintier and more elegant method, and spread widely among the higher classes; the lower classes of the population went on smoking pipes, but their betters took more and more to snuff. In the early part of the seventeenth century tobacco was very costly in Paris, and high prices were asked for it in the so-called *tabagies*, or smoking taverns. Richeliu, who...was always on the look-out for fresh sources of revenue, thought that in tobacco he could find an inexhaustible spring of wealth....Personally the

COMMENTARIES (Cont'd)

Cardinal objected to smoking, and thought that this growning habit might be checked by making it expensive; a heavy duty on tobacco wuld probably be better than unprofitable prohibition, and would be more effective in setting limits to the use of tobacco."

"With the far from disinterested change of attitude of governments toward tobacco came a corresponding change in the tone of literature. Writers in the middle of the seventeenth century had been hostile; in the last thirty years they were not only friendly to tobacco, but broke forth into paeans and panegyrics, as in the palmy days when tobacco had been." thought a panacea....

"Very significant of the interest that governments now took in increasing the consumption of tobacco--and their own revenue--is the fact that Louis XIV, who personally objected to smoking and snuff-taking, allowed the Marquis de Prade to print and circulate all over the kingdom, avec privilege du roi, a book absolutely in praise of tobacco

The tobacco monopolies and state revenues -- Louis XIV, "Edict of September 1674, in Isambert, F.A., Recueil général des anciennes lois francais, vol. 219, No. 785 (Paris, 1829), p. 145.

"Seeing that the use of tobacco has become so general in all Our dominions, that it has given occasion to most of the princes Our neighbours to make this business a chief source of their revenues, We have thought that We might draw a similar profit by introducing the tobacco monopoly; and We have considered the plan laid before Us the more reasonable, in that tobacco is not a food needful for health or nourishment, and may be a means of making it easier for Our people to bear a part of the extraordinary expenses of the present war." (as quoted in Corti, History of Smoking, 1931, p. 160)

The monopoly system -- Brooks, Mighty Leaf (1952), pp. 106-108.

"Private holders of monopoly patents were frequently and bitterly assailed as merciless leeches who outrageously increased the prices of tobacco. The widely voiced charges made against these patentees developed into a general pattern throughout Europe. Most of the complaints were justified. It is true that monopolists did adulterate good tobacco, forced the sale of inferior grades, exacted brutal punishment from even minor violators of numerous laws enacted to protect monopoly revenues, and acquired autocratic extragovernmental power through their private police, informers, and other agents....

"It was in France that the monopoly developed into an organization of exemplary efficiency under the infamous Fermiers-Généraux (Farmers-General). The small, technical duty on tobacco had, in 1629, been increased at the suggestion of Cardinal Richelieu; but when the farmers-general assumed control, a variety of taxes was instituted to meet the initial payment to the Crown of 300,000 livres--later greatly increased--for the first year of the lease.

"Savagely repressive measures were enacted upon demand of the monopolists. A victim caught with so little as a handful of unlicensed tobacco was branded and sent to the galleys. As there were frequent armed uprisings against the monopoly agents, laws were passed under which resistors were condemned to death....

"The violence of popular resistance in some of the countries outside of France forced various rulers occasionally to rescind monopoly rights. But the value of the tobacco leases and income from associated sources represented an irresistible bribery to rulers. Monopolies were regularly restored. It was to require the violent medicine of mass revolutionary movements to eliminate a system so strongly entrenched."

REFERENCES

(1) Laufer, Introduction of Tobacco into Europe (1924), pp. 48-54.
(2) Brooks, Mighty Leaf (1952), pp. 37-38, 46-47, 125-126, 184-185, 157-163.
(3) Corti, History of Smoking (1931), pp. 51-60, 149-150, 160-161, 178-186, 208-214.
(4) Dickson, Panacea or Precious Bane (1954), pp. 68, 73-77, 81-88, 91-93.
(5) Isambert, Recueil général des anciennes lois francais, vol. 219 (Paris, 1829).
(6) Taylor, Flight from Reality (1949), pp. 100-104.
(7) Koskowski, Habit of Smoking (1955), pp. 60-61, 84 ff.

4

Tobacco
Turkey (Ottoman Empire)
1605-1648

BACKGROUND

While the reaction of Western European governments to tobacco finally tended toward flexibility, at times even verging on a hypocritical opportunism, Russia and the Ottoman Turks prohibited it with the severest of punishments. The Turkish reaction also differed from that of the West in the closer cooperation that developed between religious and lay opposition. From the West, tobacco spread to Turkey, where it quickly became popular even though many attacked its use as contrary to the teachings of the Koran, in which religious taboos (haraam) are placed on a number of foodstuffs and practices including gambling, the use of narcotics, and the consumption of alcoholic beverages. One argument emphasized that the Koran forbad the use of coal, and tobacco when smoked became coal (5:232). Two concerns which often influenced the opposition to smoking in all countries are illustrated by the Turkish and Russian experiences: (1) the fear of fires being ignited by careless smokers, and (2) the development of tobacco houses as centers of political and social unrest.

CHRONOLOGY

c. 1605	INTRODUCTION	Tobacco smoking is introduced into Turkey, probably in 1605 under the reign of Sultan Ahmed (Akhmed) I (1603-1617) but possibly at the end of the 16th century (1:61). Sultan Murad II, c. 1580, is said to have cultivated tobacco in his garden purely for its medicinal properties, and to have sent its dried leaves to the king of Poland as a precious novelty (1:61; 2:102). George Sandys (3:66) claims that tobacco was first introduced by the English, who taught the Turks how to smoke it from pipes (1:61-2; 3:66). Most likely, ships from Holland, Spain, and Venice, as well as from Britain, brought the smoking habit to Turkey (2:65, 134).
1605-17	USE SPREADS	During Sultan Ahmed's reign, smoking becomes popular very rapidly and spreads across the country; Pietro della Valle comments on its use in Constantinople (1:62).
	CONFLICT BEGINS	The spread of smoking immediately divides the country into two camps. It is praised by the poets as one of the four elements (coffee, tobacco, opium, and wine) of the world of pleasure; many indulge in coffee and tobacco because wine is forbidden by the Koran. The priests (mufti), however, maintain that smoking is contrary to the teachings of the Koran and are shocked and outraged by its use. A legend arises that Mohammed, bitten by a viper, sucked the wound, spat out the poison, and from the spittle tobacco grew (5:231).
	PROHIBITION	Ahmed prohibits smoking; those detected smoking are punished by having a pipe-stem thrust through their nose and being paraded on donkeys (3:66; 2:135)
1623	MURAD IV: PENALTIES INCREASED	Murad (Amurath) IV the Cruel (1623-40) becomes sultan and continues the prohibition and increases the penalties.
1633	TOBACCO HOUSES RAZED: DEATH PENALTY DECLARED	On August 27, 1633, royal fireworks ignite a fearful fire which spreads across half of Constantinople, burning over 20,000 wooden buildings. The people, holding the officials

CHRONOLOGY (Cont'd)

		responsible for the catastrophe, congregate in the tobacco houses complaining of the conditions of government. The sultan, angered, gives orders that all tobacco houses be razed and forbids the use of tobacco under penalty of death. Smokers are dealt with as severely as the lowest criminals, and punishments assume a sadistic character (2:136-137). Murad may be motivated by his fear of more fires being started by smokers (4:60).
1633-40	DEATHS RISE	Increasing numbers are condemned to death; many of these sentences could be explained by the sultan's greed, since the estates of the punished pass to him. Even foreigners are not spared. His travels and military maneuvers become distinguished by increasing numbers of executions; during his campaign against Persia, he puts to death 1,000 prisoners simultaneously (2:137-38).
	USE SPREADS	Despite this persecution, smoking persists.
1640	SNUFFING	Murad dies and is succeeded by Ibrahim. The prohibitory laws against smoking remain in force, but many who dreaded the penalties turn to snuff-taking, and the habit becomes general. De Thevenot reports that the Sultan walked through the streets in disguise to see if his orders against smoking were obeyed, and executed violators (4:60).
1648+	LAWS REPEALED	Mohammed IV, a smoker, comes to the throne; prohibitions are relaxed and the strict laws repealed.
	USE SPREADS CULTIVATION	Smoking increases enormously, both from dry and water pipes. The cultivation of tobacco begins in the Ottoman Empire, whose climate and soil are very favorable to its growth, and trade soon takes on considerable importance (2:139; 1:63).

COMMENTARIES

The Eastern response -- Brooks, Mighty Leaf (1952), p. 77

> "Most of the eastern monarchs were impressed by the opinion of their medical advisors that tobacco was 'hot and dry' and therefore an antiaphrodisiac which would certainly induce sterility. There was, too, extreme hostility to a habit introduced by infidel outsiders (who, incidentally, sold the supplies required by smokers at high prices) and a natural suspicion of a new sedative, probably a drug."

Political and economic influence -- Ortiz, Cuban Counterpoint (1947), pp. 125-128.

> "It has been said that the persecutions suffered by tobacco users were due not only to religious but to political reasons as well. With the custom of smoking, houses or 'tobacco taverns' came into being where the habitués not only could buy the weed and pipes and other smoking accessories, but could sit and indulge their vice and assemble and talk over and discuss matters of government, whose authorities did not welcome public discussions of their policies or possible subversive activities. So it is not to be wondered at that in Arabia, Turkey, and Russia these 'tobacco houses' were persecuted, as were the coffee houses, too, and that such establishments were regarded with suspicion in other European countries....These characteristics aroused suspicion against these centers of opinion, regarded as haunts of the devil, but they did not justify the terrible penalties imposed on tobacco, not only against the assembling of smokers, but even against every act of planting, cultivation, selling, and using that plant.

COMMENTARIES (Cont'd)

> "The fundamental reasons for these cruel persecutions were basically economic....This unexpected commercial phenomenon gave rise to large and very expensive foreign imports. which were not compensated for and upset the balance of domestic economy. But it also upset the groups of established merchants, giving rise to a new and lucrative trade, outside their control, by which other dealers profited handsomely, generally foreign intruders.... Naturally, the great merchants of the seaports could not view with favor this new lucrative merchandise, which changed people's habits and was as costly as it was sought after, and which others now sold outside their establishments. And they worked against tobacco until they finally brought it under their control. Once this was accomplished, and the exotic plant was finally grown within the realm, the agitation of the opposition died down....
>
> "At the same time the governments, alert to their own interests, were annoyed at the sudden appearance of tobacco, without permission from them and without advantage to them....
>
> "This seemingly insignificant novelty of tobacco gave rise to various problems and a danger. It would have to be brought under control. If the appearance of tobacco in the old Eurasian world aroused surprise, curiosity, and desire, it also aroused deep suspicion and envy. Some feared that the serfs, by becoming the small planters of this rich crop, might manage to emancipate themselves. The free planting of tobacco on small plots aroused fear; this was a subversion of the traditional order on the land. For this reason, once the tremendous mercantile and agricultural possibilities of tobacco were grasped, it was vigorously combated; and in those nations where an absolute form of government prevailed, accompanied by tyranny, feudalism, and serfdom, such as Turkey, Russia, China, Japan, and others of the same social texture, the persecution was merciless, with the death penalty and the most dire execrations.
>
> "In those countries where such sharp economic contrasts did not exist, tobacco, though hampered in the beginning until it became an object of taxation, did not suffer such drastic measures...."

Patterns of use -- Sandys, Relation of a Journey Begun A.D. 1610 (1973), p. 66.

> "The Turks are also incredible takers of Opium, whereof the lesser Asia affordeth them plenty: carrying it about them both in peace and in warre; which they say expelleth all feare, and makes them couragious: but I rather thinke giddy headed, and turbulent dreamers; by them, as should seeme by what hath been said, religiously affected. And perhaps for the selfe same cause they also delight in Tobacco; they take it through reeds that have joyned unto them great deads of wood to containe it: I doubt not but lately taught them, as brought them by the English: and were it not sometimes lookt into (for Morat Bassa not long since commanded a pipe to be thrust through the nose of a Turke, and so to be led in derision through the Citie,) no question but it would prove a principall commodity. Neverthelesse, they will take it in corners, and are so ignorant therein, that that which in England is not saleable, doth passe here amongst them for most excellent."

Murad IV -- Corti, History of Smoking (1931), pp. 138-139.

> "Whenever the Sultan [Murad IV] went on his travels or on a military expedition his halting-places were always distinguished by a terrible increase in the number of executions. Even on the battle field he was fond of surprising men in the act of smoking, when he would punish them by beheading, hanging, quartering, or crushing their hands and feet and leaving them helpless between the lines....Nevertheless, in spite of all the horrors of this persecution and the insane cruelties inflicted by the Sultan, whose blood-lust seemed to increase with age, the passion for smoking still persisted....Even the fear of death was of no avail with the passionate devotees of the habit."

Murad and his successors -- de Thévenot, Travels into the Levant (1687), pt. 1, p. 60:

> "It was chiefly for tobacco that he [Sultan] made many heads fly. He caused two men in one day to be beheaded in the streets of Constantinople, because they were smoking tobacco. He had prohibited it some days before, because, as it was said, when he was passing along the street where Turks were smoking tobacco, the smoke had got up his nose. But I rather think it was in imitation of his uncle Sultan Amurat [Murad IV, 1623-1640], who did all he could

COMMENTARIES (Cont'd)

to hinder it so long as he lived. He caused some to be hanged with a pipe through their nose, others with tobacco hanging about their neck, and never pardoned any for that. I believe that the chief reason why Sultan Amurath prohibited tobacco, was because of the fires, that do so much mischief in Constantinople when they happen, which most commonly are occasioned by people that fall asleep with a pipe in their mouth, that sets fire to the bed, or any combustible matter, as I said before. He used all the arts he could to discover those who sold tobacco, and went to those places where he was informed they did, where having offered several *chequins* for a pound of tobacco, made great entreaty, and promised secrecy, if they let him have it; he drew out a scimitar under his vest, and cut off the shopkeeper's head" (as quoted in 1:62-63).

ADDITIONAL REFERENCES

(1) Laufer, Introduction of Tobacco into Europe (1924), pp. 61-64.
(2) Corti, History of Smoking (1931), pp. 65, 134-139.
(3) Sandys, Relation of a Journey Begun A.D. 1610 (1973), p. 66.
(4) de Thévenot, Travels into the Levant (1687), pt. 1, p. 60.
(5) Ortiz, Cuban Counterpoint (1947), pp. 225-228, 231-232, 246.
(6) Brooks, Mighty Leaf (1952), pp. 76-77.

5

Tobacco
Russia
1600-1705

BACKGROUND

In the 17th century, Russia was ending a long period of isolation from European influences. Life was harsh and characterized by extremes of drunkenness and revelry on the one hand and repentance and religious prostrations on the other. The Church was conservative and feared modernization and other "Western influences," whereas the tsars, struggling to unify and modernize society and establish their control over it, were drawing upon Western models in their efforts. It was in this period of turbulence and change that tobacco use spread into Russia, and these conditions significantly affected the subsequent Russian response. As in Turkey, the initial response was an excessively violent attack on the substance and its users by secular and religious authorities, who denounced tobacco as irreligious, unhealthy, and a dangerous fire hazard, and who feared the tobacco houses as sources of sedition. Similarly, the Russian efforts at repression failed; they were finally abandoned by Peter the Great, and a trade monopoly was established with the English, who by this time were active purveyors of tobacco.

The response of the Russian Church illustrates the links that can develop between drug use attitudes and politics: tobacco was disliked as much as a symbol of foreign influence as a health hazard, and when the church entered into conflict with Tsar Peter the Great over his attempts to "modernize" society, their different views on tobacco use became embroiled in the wider issues of their political struggle. In the end, Peter the Great's acceptance of tobacco use prevailed. Once a ruler adopted it, or accepted its use, or saw its utility as a source of revenue, the severest of religious admonitions were of little effect in an autocratic society where the Church was subservient to the state.

Finally, it should be observed that Russian smoking techniques differed from those of Western Europe. There was heavy use of water pipes, probably derived from Turkey (5:60). The Russians also inhaled as deeply as possible so that the combined hyperventilation and intoxication produced unconsciousness (10:90; 7:145; 1:19). This more extreme mode of use may help explain the early violent reactions of the tsars.

CHRONOLOGY

c.1600	INTRODUCTION	Italian, Spanish, and Portuguese sailors introduce tobacco into Eastern Europe. In Northeast Europe, Turkish ships carry it to the coastal cities of the Black Sea, English sailors to the Baltic, and travelers from Germany and Poland into inland Russia. The habit of smoking begins to permeate Eastern Europe (1:18; 2:65).
1613-45	MICHAEL ROMANOV	In 1613, Michael Romanov becomes the first tsar of his line.
1618-48	USE SPREADS	The contact of armies during the 30 Years War helps spread tobacco throughout Central and Eastern Europe. In Russia, smoking increases rapidly, with people openly smoking in churches, even during services (2:100-3, 108).
	OPPOSITION	Patriarch Philaretes, a bitter antitobacconist and Michael Romanov's father, convinces his son that smoking is profane and abominable. The spread of smoking meets with stubborn resistance from the clergy. In addition, smoking is blamed for the great increase in fires in Moscow (2:140). The literature of the time is bitterly hostile. Tobacco is called "the devil's plant," and legend circulates that it had sprung from the grave of an adulteress, and that the devil revealed

CHRONOLOGY (Cont'd)

		his presence through its odor and smoke (3:232). In 1630, a violent attack by clerics denounces tobacco as a deadly sin, based on Mark 7:15: "The things which come out of him, those are they that defile the man" (2:143).
1634	PROHIBITION	Tsar Michael issues an edict (ukase) that smoking is to be regarded as a deadly sin. Nobody, national or foreign, is allowed to smoke, take snuff, or trade in tobacco. First offenders, whether users or vendors, are to be punished with the knout and have their noses slit (8:100,140; 2:141). A special court for dealing with smokers is established. Persistent offenders are exiled to Siberia and their property is confiscated (2:140; 3:76-7).
1643	USE CONTINUES	The tobacco habit continues; Adam Orlearius visits Moscow and reports on the spread of smoking and its repression (8:100, 140; 2:141). However, financial pressures lead the tsar to violate his own laws and establish a fiscal monopoly of "the God-hated and impious herb" (1:18).
1649+	SMUGGLING AND CULTIVATION	Despite repeated prohibitions, the Dutch are smuggling tobacco from their plantations to "underground" smokers in Russia; crops are gathered annually in Circassia.
1649	BAN AFFIRMED	Tsar Alexis (1645-76), the second Romanov ruler, publishes a ukase forbidding smoking. Punishments remain very severe, including torture and exile; the criminals are racked and tortured publicly. Special vigilantes are appointed to search for contraband tobacco in Moscow (2:142-3). Anglo-Russian tobacco trade declines drastically (1:19).
1655	DEATH PENALTY	The death penalty is confirmed by ordinance, but use continues (1:18).
1676-89	USE INCREASES.	Tsar Theodore III (1676-1682) inaugurates a period of milder restraints; use begins increasingly to spread from court and foreign circles to other sections of the population. During the regency of Sophia (1682-1689), Western influences increase; legalization of tobacco use and trade is "in the air." In the last years of Theodore's reign, Patriarch Joachim declares his disturbance over "signs of approaching changes" in dress, beards, and tobacco (1:19). Joducus Crull (1698) describes widespread tobacco use during these years (7:145; 5:59-60).
1681	TRADE	English government, attracted by the economic potentiality of the Russian tobacco market, begins diplomatic maneuvers to open it to its subjects (1:20-2).
1689	PETER THE GREAT IGNORES BANS	Peter the Great (1689-1725) becomes sole ruler of Russia, inaugurating a program of modernization, relying on Western models and advisors. Peter ignores the bans on smoking, and many foreign smokers congregate around the court.
1690	CHURCH OPPOSITION	Patriarch Joachim tries to expel the foreigners (heathens) who disobey his prohibition of smoking. Tsar Peter ignores the patriarch and continues his association with foreigners.
1695-6	TRADE GRANTS	Limited trade grants are awarded to English merchants.

CHRONOLOGY (Cont'd)

1697	TSAR SMOKES; BAN REMOVED	Peter travels to Western Europe, picks up the habit of smoking, and decides the Russian clergy's ban is oppressive. In Utrecht, King William III of England, urged by planters, asks him to revoke the existing Russian regulations and permit entry of British tobacco. On February 1, a ukase is issued permitting open sale and consumption of tobacco because of "its wide use and ubiquitous secret trade" in which the state did not share (1:20; 2:176-7; 4:151).
1698	TRADE MONOPOLY ESTABLISHED	A British joint stock company "lends" the tsar $12,000 for the sole right to import tobacco into Russia. Upon his return home, Peter confirms the permission to import tobacco and to smoke, and he farms out the monopoly to a friend. British workmen set up factories in Russia to manufacture the imported British leaf (1:20-9; 2:177-8; 4:152).
	CHURCH REVOLT	A minor ecclesiastical revolt occurs when Peter's agreement with the concessionaire becomes known, but it is quickly suppressed.
1702-4	CONFLICT WITHIN TRADE MONOPOLY	Peter reneges on his agreement to prohibit the cultivation of domestic tobacco. The tobacco factories begin blending Russian and British tobacco, which arouses a protest from the London merchants excluded from the concession, who want the Russian market exploited solely for imported leaf from America. Queen Anne of England recalls the British workmen in Russia, and the factory machinery is destroyed (1:52ff; 4:152-3).
1705	TRADE CONFLICT CONTINUES	The original contract with England is renewed. Not long afterwards, the trade agreement is again abruptly terminated and importation of tobacco is prohibited.
	USE SPREADS	Due to Peter's opening of the way for new customs, the tobacco habit spreads widely in Russia.

COMMENTARIES

Church versus state -- Corti, History of Smoking (1931), pp. 174-176.

> "Of what use...was any private opposition, when tobacco was conquering princes and potentates? It was an age of Absolute Monarchy, and if the sovereign lit his pipe all his subjects could puff theirs freely. A striking instance is the case of Russia, where Peter the Great's autocracy began to make itself felt toward the end of the seventeenth century.... The young Tsar, hungering and thirsting for knowledge, came under the influence of [the better-educated foreign] society, without giving up his taste for drink and debauchery. His way of life soon led to a quarrel with the Patriarch, the head of the Orthodox Church, which had hitherto been a state within the State. In 1690, the Patriarch Joachim tried to expel the foreigners from the Tsar's Court. As a crowing outrage [the foreigners] dared to disobey the Patriarch's prohibition of smoking, and ventured to tell the Tsar, only too ready to listen, of the profit and pleasure of this new vice....[Peter] soon took to smoking himself, and the middle-sized Dutch pipe which was then in common use became the Tsar's inseparable companion. To the great wrath of the Patriarch, Peter not only himself smoked, but allowed his subjects to smoke. The Patriarchs of Moscow had soon to recognize that their independence in other more weighty matters could not be maintained: the Church became a department of the State, instead of a state within the State. Soon Tsar Peter could be seen....dressed like a Dutch skipper, pipe in mouth, drinking and smoking in the taverns."

COMMENTARIES (Cont'd)

Tobacco use and punishments -- Crull, Ancient and Present State of Muscovy (1698), p. 145.

> "Formerly tobacco was so extravagantly taken, as the *aqua vitae*, and was the occasion of frequent mischiefs; forasmuch as not only the poorer sort, would rather lay out their money upon tobacco than bread, but also, when drunk, did set their houses on fire through their negligence. Besides, (which made the Patriarch take a particular disgust at it) they used to appear before their images with their stinking and infectious breath; all which obliged the Great Duke, absolutely to forbid both the use and sale of tobacco, in the year 1634, under very rigorous punishments: For the transgressors to have their nostrils slit, or else to be severely whipt. Nevertheless, it is of late years more frequently used, than ever it was before since the time of the edict, and search being not now so strict against the takers, nor the punishment so rigorously executed. Foreigners having the liberty to use it, makes the Muscovites often venture upon it in their Company, they being so eager of tobacco, that the most ordinary sort, which formerly cost not above 9 or 10 pence per pound in England, they will buy at the rate of 14 and 15 shillings; and if they want money, they will struck their cloaths for it, to the very shirt....They commonly light their pipe with a firebrand, sucking the smoak through the horn with so much greediness, that they empty the pipe at two or three sucks; when they whiff it out of the mouth, there rises such a cloud, that it hides both their faces and the standers by. Being debarred from the constant use of it, they fall down drunk, and insensible immediately after, for half a quarter of an hour, when the tobacco having had its operation, they lep up in an instant, more brisk and lively than before, when their first discourse commonly tends to the praise of tobacco, and especially of its noble quality in purging the head" (as quoted in 5:59-60).

Tobacco use and punishments -- Orlearius, Beschreibung der Moskowitischen und Persienischen Reise (1696), pp. 100, 140.

> "The Russians have long been addicted to smoking, even a poor man preferring to spend his last penny on tobacco rather than on bread. However, it soon became apparent that the people, so far from being benefited, got great harm from the practice. The ordinary citizen, his servants, his serfs, all alike would neglect their work; owing to the carelessness of smokers many houses were burned to the ground, while even in the churches the sacred icons, which should be honoured only with incense and sweet perfumes, stank of tobacco smoke. Consequently in 1634 the sovereign, at the instigation of the Patriarch, issued an order strictly forbidding the use or sale of tobacco, as well as all private traffic in brandy and beer. Offenders are usually sentenced to slitting of the nostrils, the bastinado, or the knout; those convicted of taking snuff have their noses torn away. We ourselves had met with many victims of each of these forms of torture, which were inflicted alike on men and women.
>
> "The knout seemed to be a barbarous method of punishment; I saw it inflicted in September 1634 on eight men and one woman who had been convicted of selling tobacco and spirits. These persons were made to strip to the loins, in the presence of the tribunal; then one after another was hoisted on to the back of the executioner's assistant, around whose neck the culprit's arms were fastened, his legs being tied together by a rope held by another attendant, so that he could move neither hands nor feet. The executioner than took his stand behind the victim at a distance of three paces and plied the long stout whip with such force that the blood flowed freely after every stroke; at the end of the knout are three thongs, the length of a finger, made of hard untanned elk-skin, which cut like a knife. In the case of grave offenders the victims are sometimes whipped to death; in this instance each man received from twenty to twenty-six strokes; the woman endured sixteen, after which she lost consciousness. Not a finger's breadth of skin was left of their backs, which looked like the flayed carcase of an animal" (as quoted in 2:141).

State policy -- Price, Tobacco Adventure to Russia (1961), pp. 17-18, 19n.15.

> "From the sorrow of the fateful day in the late sixteenth century when the ubiquitous English sailor of legend first introduced the Muscovite to his pipe, the haunting possibility of a great northern market for tobacco was to vex the English commercial immagination. Throughout the ensuing two centuries, this haunting possibility, the Russian market, remained

COMMENTARIES (Cont'd)

only a vision--a vision, however, of splendor, personal and national, a mercantilist Eldorado. At times the prize seemed near, both for individual English adventurers and for English national interest, but always between the eager English seller and the even more eager Russian buyer stood the Muscovite State and State Church, forbidding, anathematizing, punishing, sometimes relenting, promising, agreeing even permitting, but never withdrawing--the inevitable, if uninvited, guest in every smoker's cabinet in all the Russias...
'Despite the numerous public whippings and slittings that Olearius attended, the Muscovite State was not entirely consistent in its attitude towards tobacco. Financial embarassment (and the 'inelastic demand' of a by-now-corrupted section of his subjects) led the Czar [Michael] to violate his own laws and make a fiscal monopoly of 'the God-hated and impious herb'; upon which his 'Treasury proceeded to sell tobacco for wellnigh its weight in gold.' However...the monopoly was abolished and the ban restored by Michael's successor, the pious and conservative Alexei (1645-1676) in his Ulozhenie or law code of 1649" (p. 18).

"To Voltaire, the tobacco contract was attractive to Peter precisely because it enabled him to assert both his intellectual independence of and absolute control over the church [Voltaire, Oeurvres completes, 17;148, 487-8]. It is certain that Peter's courtiers regarded tobacco as a major symbol of their intellectual emancipation and for this reason used it prominently in their bacchanalian mock religious ceremonies. The clergy for their part regarded the introduction of tobacco as one of the most sinister of Peter's innovations. 'What sort of a tsar have we now,' they said, 'to let in that cursed tobacco?' The present popes are wolves, outragers of the Church of God; the popes and the people of other orders smoke tobacco, and then receive the antidoron'" (p. 19, n. 15).

ADDITIONAL REFERENCES

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(2) Corti, History of Smoking (1931), pp. 65, 139-143, 174-178.
(3) Ortiz, Cuban Counterpoint: Tobacco and Sugar (1947), pp. 225-6, 118, 230-2.
(4) Brooks, Mighty Leaf (1952), pp. 77-78, 151-153.
(5) Laufer, Introduction of Tobacco into Europe (1924), pp. 59-61.
(6) Laufer, Tobacco and Its Use in Asia (1924b), p. 16.
(7) Crull, Ancient and Present State of Muscovy (1698), p. 145.
(8) Orlearius, Beschreibungung der Moskowitischen und Persienischen Reise (1696), pp. 100, 140.
(9) MacInnes, Early English Tobacco Trade (1926), pp. 171-2, 174-6.
(10 Blum et al., Society and Drugs (1969), p. 90.

6

Tobacco

Japan

1542-1700

BACKGROUND

The phenomenal spread of tobacco use was not just limited to Europe; soldiers, traders, and adventurers soon brought it to the Orient where it proved to be equally irresistable and incapable of control. Like Turkey and Russia, Japan and China provide examples of the ineffectiveness of merciless persecution by absolutist governments against this foreign substance. Japan was the first Eastern nation to practice smoking extensively both for recreation and for medical purposes (2:7). Its experience illustrates not only the futility of severe prohibitions of tobacco cultivation, sale and use, but also the complex motivations behind such prohibitions, including fear and disdain of foreign influences, losses of valuable food crops, and fires.

CHRONOLOGY

1542	INTRODUCTION	Portuguese sailors on board a Chinese pirate ship land on the Japanese coast, the first Europeans to see this land; they bring tobacco with them. Commerce begins between Portuguese merchants and the Japanese; Portuguese seamen bring tobacco leaves and teach inhabitants of Kiushiu, an independent island, to smoke (4:145).
1573	TRADE	Tobacco seeds are introduced by the Portuguese as a tribute, and tobacco becomes an article of commerce (1:68)
1595	LIMITED USE	Smoking is established on Kiushiu, but tobacco is not yet cultivated (4:145).
1596		Seeds are planted in the Imperial gardens at the capital city of Kyoto (4:145).
1605	CULTIVATION	Cultivation begins. In 1605, tobacco is planted around Nagasaki, according to Enroku, a 1797 treatise written in Chinese by the Japanese author Ohotsuki Banuwi (1:69; 2:2; 4:146).
1603-9	USE SPREADS	Smoking spreads to all classes of society and smoking clubs flourish in the capital city (14:146). First tobacco is smoked rolled up in a piece of paper, later in pipes. Earliest pipes are of bamboo, then of copper and other metals, imitating those of the foreigners but much larger in size (1:74-5; 3:198).
1603	PROHIBITION	Rowdy members of the Kyoto smoking clubs evoke the concern of the rulers during the reign of young regent Hideyori. His shogun, Ieyasu, issues a prohibitory edict for all Japan, but to little effect (1:75; 3:146; 4:75-6).
1607, 1609	FURTHER BANS	Two further edicts are issued making cultivation a penal offense. One of the chief motives of antitobacco laws is the fear that cultivation would interfere with the production of rice and corn (1:72; 4:146).
1612	TRADE USE BANNED	Proclamation forbidding trade in tobacco is issued; use, sale, and cultivation are prohibited. Ieyasu decrees that the property of any man detected selling tobacco would be handed

CHRONOLOGY (Cont'd)

		over to his accuser; anyone arrested for "trafficking" on horseback can lose both the tobacco and the horse.
	BAN FAILS	Despite attempts at repression, smoking has become so general that even officers at the royal court indulge the habit.
1614	PENALTIES	English observer reports that 150 persons at Osaka are caught trading in tobacco and put in jeopardy of their lives (3:76).
1615	USE SPREADS	Edict warns those in the army that their property will be confiscated if they are caught smoking (4:145). An English captain cites, "It is strange to see how these Japons, men, women, and children, are besotted in drinking that herb and not ten years since it was first introduced" (2:1).
1616	PENALTIES INCREASED	Edict increases severity of penalties to include both prison and fines.
1616+	USE SPREADS	Use continues to spread rapidly, even among the upper classes who are responsible for prohibition. Accordingly, the laws fall into abeyance.
1625	CULTIVATION ALLOWED	Permission is granted to cultivate and plant tobacco, except in ricefields and vegetable gardens.
1639-50	USE SPREADS	Smoking takes its place in polite society; tobacco accompanies the ceremonial tea offered to guests. By 1650 use spreads to include respectable women and snuff is introduced by Jesuit missionaries and Portuguese traders (1:78; 3:144).
1651	PROHIBITION REPEALED	Tobacco smoking is recognized as legal, as seen from a notification forbidding people to smoke outside of their houses (1:72).
1667	CULTIVATION CONTROLS	Order proclaims that tobacco should be planted in lands specially reclaimed for that purpose, in order not to interfere with production of rice and corn (1:72).
c. 1675	ACCEPTANCE GROWS	The discussion of merits and demerits of tobacco continues. Its use is feared both as a health hazard and a fire hazard, but it is praised for its soothing and pleasing recreational use. The Japanese medical profession on the whole appears to be in favor of smoking in moderation (1:72, 79, 82).

COMMENTARIES

The spread of tobacco use in Japan -- Corti, History of Smoking (1931), p. 147.

> "In 1616 the penalties were made still more severe....But it was all of no avail; the custom spread rapidly in every direction, until, as we read in an Imperial poem of the time, many smokers were to be found in the Mikado's palace. Finally even the princes who were responsible for the prohibition took to smoking, and the great landowners and rulers of the Daimios, the military and feudal aristocracy, who were all devotees of the habit, were glad to let the laws fall into abeyance."

COMMENTARIES (Cont'd)

Roots of tobacco opposition -- Brooks, Mighty Leaf (1952), pp. 75-76.

> "In Japan, as in all countries where smoking had been made known to the general populace, the first uses of the pipe were attended by extravagances and the excitement which accompanies a particularly desirable new habit. Various smoking societies had been formed and members had made themselves something of a nuisance to the authorities. Mikados and shoguns viewed with disfavor a custom introduced by foreigners; further, there had been occasional fires attributed to careless smokers, and acreage needed for rice and other essential cereals was being cultivated in tobacco."

Economic roots of tobacco opposition -- Satow, The introduction of tobacco into Japan, Trans. Asiatic Soc. Japan (1878), p. 72.

> "One of the chief motives which are said to have prompted the antitobacco law, was the idea that the cultivation of the plant would interfere with the production of rice and corn, and this is confirmed by an order given in 1667 that tobacco was to be planted in lands specially reclaimed for that purpose, which order assigns the reason already given. Tobacco was also feared because fires had frequently occurred from carelessness in its use, and further, there was a notion that it was prejudicial to the general health."

REFERENCES

(1) Satow, Introduction of tobacco into Japan, Trans. Asiatic Soc. Japan (1878).
(2) Laufer, Tobacco and its Use in Asia (1924), pp. 1-3, 7, 17, 31-38.
(3) Brooks, Mighty Leaf (1952), pp. 74-76, 144-145, 198.
(4) Corti, History of Smoking (1931), pp. 144-147.

7

Tobacco
China
1567-1700

BACKGROUND

Some botanists have advanced the theory that tobacco was indigenous to China. The traveler and naturalist Pallas argued that Chinese tobacco smoking predated the discovery of America because of the almost universal prevalence of the custom among the Chinese and Mongols, the form of their pipes, and the manner in which the dried leaves were wrapped (5:72). Most authorities agree that tobacco did not come to China until the second half of the 16th century, by way of the Portuguese and Japanese.

Several similarities exist between the spread of tobacco in China and elsewhere. Tobacco was hailed for its medicinal purposes and its use was particularly prominent among soldiers. Just as the Thirty Year's War aided the spread of tobacco use into Central Europe (see persp. 5 and 6), so the conquering Manchu armies contributed significantly to its spread in China. As in Japan, the government's antagonism toward tobacco was intense and was governed in part by a dislike of anything foreign. This hatred of "barbarian" influences would equally affect the Chinese opposition to opium. But despite all opposition, China became the great smoking nation of Asia, thus facilitating the subsequent spread of opium smoking in the 18th century (see persp. 22).

CHRONOLOGY

1567	INTRODUCTION IN SOUTH	Most authorities maintain that south and southwest China are introduced to tobacco by the Portuguese, who land at Macao and found a small colony in Canton. Canton trades with the Philippines, which have already become acquainted with tobacco from the Spaniards (1:147; 5:74).
c. 1600	INTRODUCTION IN NORTH	Tobacco is introduced into north and northeast China by the Japanese during the wars surrounding the temporary annexation of Korea by Japan. From there it spreads to Manchuria in central China, and the Manchus spread it further (5:85).
1600+	USE SPREADS	Tobacco is heralded as a medicine for colds, malaria, and cholera. In this period, the first account of tobacco in China is written by the physician Chang Kiai-pin, who studies the physiological effects of smoking and recommends its remedial uses. In general, the medical profession is favorable, though some denounce its deleterious effects (2:315). It becomes known as "the kindly plant," "smoke that revives the spirit," and "pill of five elements" (6:225). Use quickly becomes social and personal among all ages and classes. During the reign of the Ming Emperor Wan-Li (1573-1620), the habit of smoking becomes as much an institution as tea drinking (1:148).
	MILITARY USE	It becomes particularly popular among the Manchu soldiers. The habit penetrates the northern as well as the southwestern provinces, where it is said to be connected with the subjugation of Yunnan province by the Manchus (2:3).
1638	PROHIBITION	A decree is issued threatening with decapitation any persons found guilty of trafficking in tobacco with the "outer barbarians" (5:72).

CHRONOLOGY (Cont'd)

	BAN REPEALED; MEDICINAL USE	The decree proves ineffective; illicit use continues and expands. It becomes popularly used as an intoxicant, an antagonist for wine, to reduce hunger and aid digestion (4:90-1). The order is rescinded because it is thought tobacco has cured colds in the army--its cultivation and sale are permitted in return for payment of a tax (2:3-4; 4:40-91).
1641	PROHIBITION	Tsung Cheng, the last ruler of the Ming Dynasty, issues an edict prohibiting smoking; the edict fails. The emperor blames his failures on continued use within court circles.
1644	BAN REMOVED BY MANCHUS	The Manchu, after they conquer Peking, revoke all existing tobacco prohibitions; smoking becomes the court vogue.
1644+	USE SPREADS	Encouraged by the court example, the Chinese become great smokers. Although--like the Japanese--they are moderate in their use of tobacco, the Chinese become the most active propagators of tobacco and smoking all over Asia, playing the same role as had the English in Europe (2:7, 15).
c.1650	SNUFF INTRODUCED	Snuff is introduced by Jesuits and is utilized therapeutically. At first, snuff use remains restricted to the aristocratic circles; because of its exotic character and foreign source, it is regarded with suspicion. Converted Chinese Christians are called "snuff-takers" (3:144).
1685		Snuff is mentioned on a Canton customs tariff list for foreign imports (7:32).
1694	CULTIVATION	The earliest Chinese chronicle indicating tobacco cultivation on Taiwan appears; tobacco chewing is not practiced in China, Tibet, Korea, or Japan, but snuff is taken by Chinese, Tibetans, and Japanese (2:19, 31-2).
c. 1700	SNUFF SPREADS	Snuff taking, first restricted to the aristocratic classes, reaches its height of popularity. It is imported from France until the growing demand causes the Chinese to open their own factories in Canton and Peking. Snuff use is now almost entirely recreational (3:144-5; 2:33).
		Cultivation of Nicotiana tabacum is firmly established in China. Nicotiana rustica is cultivated to a limited extent in the northern districts (2:4-5).

COMMENTARIES

Tobacco in Asia -- Blum et al., Society and Drugs (1969), pp. 90-91.

> "Japanese use was first reported in 1615...when the Japanese emperor prohibited it because Japanese men, women, and children were 'besotted in that herb not ten years since its introduction.' [It was probably introduced by the Portuguese.] In China, about the same time, it was heralded as a medicament for colds, malaria, and cholera, but use quickly became social and personal; soldiers were the first group to take it up, but soon all ages and classes were smoking when tobacco was available. The imperial response was an edict of decapitation for smokers in 1638, which proved unenforceable as illicit use continued and expanded. One religious sect continued to forbid it, but--according to one herbal--it was popularly used for intoxication, as an antagonist for wine, and to reduce hunger and aid digestion. In India, use began in 1605 when, according to the records, a king took it

COMMENTARIES (Cont'd)

on advice of a traveler who claimed that, since the Europeans would do nothing foolish, smoking must be the correct thing to do. The king's physician demurred but the image of the wise European carried the day. Elsewhere in Asia, its spread was rapid and among some peoples it was incorporated into rituals. Among the Ainu, for example, it was said that a 'tobacco ordeal' was used as a trial for accused women; those not vomiting a mixture of water and tobacco ash were declared innocent. Laufer states that by the twentieth century only one Asian group was not using it--the Yami on an island near Formosa, who are also alcohol prohibitionists. How they managed their resistance would be well worth knowing. An interesting point made by Laufer is that tobacco chewing was adopted in Asia only by groups already given to betel chewing. Although he is not quite correct, the tendency for one drug to be substituted for another, once a method of administration has become popular, is emphasized by the betel- and tobacco-chewing correspondence."

Subversive tobacco -- Brooks, Mighty Leaf (1952), p. 76.

"The use of tobacco in China then was considered subversion of the national interest. Like the mikados the rulers of China 'had a little list,' but when these offenders to smoking disappeared, others took their place. Official objections to smoking were clearly ineffectual; therefore, a final decree ordered that any transgressors caught importing the foreign weed into China were to be decapitated."

Tobacco and opium smoking -- Laufer, Tobacco and Its Use in Asia (1924), pp. 23-24.

"A new investigation of this subject which I made on the basis of Chinese sources has led me to the conclusion that opium-smoking sprang up as a sequel of tobacco-smoking not earlier than the beginning of the eighteenth century...The opium-pipe is based on the tobacco-pipe and...opium-smoking has grown out of tobacco-smoking."

An address from Emperor Tsung Chang to the princes and high officers, 1641 -- as quoted in Lowes, Genesis of International Narcotics Control (1966), p. 23.

"Why do you not lead the soldiers yourselves in the practice of archery? The elder youths should practice the horned bow and winged arrow; the younger should be skilled in using the wooden bow and willow-twig arrow. Our dynasty in military exercises makes archery the chief thing. To smoke tobacco is a fault, but not so great a fault as to neglect bow exercise. As to the prohibition of tobacco-smoking, it became impossible to maintain it, because you young princes and others smoked privately though not publicly; but as to the use of the bow this must not be neglected."

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(2) Laufer, Tobacco and Its Use in Asia (1924), pp. 3-19, 31-33.
(3) Brooks, Mighty Leaf (1952), pp. 7, 34, 144-145.
(4) Blum, Society and Drugs (1969), pp. 90-91.
(5) Satow, Introduction of tobacco into Japan, Trans. Asiatic Soc. Japan (1878), pp. 72-74, 79-80, 85-86.
(6) Koskowski, Habit of Smoking (1955), pp. 48-53.
(7) Lowes, Genesis of International Narcotics Control (1966), pp. 22-23.
(8) Royal Commission on Opium, First Report. Vol.1 (1894), pp. 153-155.

8

Tobacco
Prussia and Italy
1830-1851

BACKGROUND

Protests involving substance use have long played a prominent role in political unrest. Because of attempts to prohibit or limit use or regulate production, sales, or price in order to maximize revenues, governments continually have had to face the often violent opposition of habitués. Furthermore, because of the particular emotional attachments that develop around the use of psychoactive substances, they frequently become popular symbols for protests which center around wider social, economic, and political issues. As a familiar example, we may take the important role tea played in galvanizing the American colonies into rebellion. The British tea tax not only engendered the Boston Tea Party but also a protest movement throughout the colonies which equated abstinence from tea with patriotism (2).

Less well known is tobacco's role in the revolutions of 1848 in Milan and Berlin. The Milanese revolt illustrates the use of tobacco as a symbol of protest. At that time the provinces of Lombardy and Venetia were directly under Austrian administration and legally part of the Austrian Empire; the tobacco monopoly was also held by the Austrians. A Smoker's Rebellion was organized in which the citizens stopped smoking to protest the monopoly and foreign domination. In Berlin, on the other hand, where the autocratic and conservative Prussian court prohibited smoking in public, the freedom to smoke became one of many civil and political rights demanded by the rebellious citizens. With this victory fell the last barriers to the progress of smoking (1:251).

CHRONOLOGY

1830	BERLIN UPRISINGS	Working men, tailors, and apprentices protest for several evenings in Berlin, unsuccessfully demanding lighter taxation, the abolition of rent and dog taxes, and free smoking in the Tiergarten.
1830's-1840's	USE INCREASES	Despite prohibitory edicts, smoking grows steadily--to the great displeasure of King Frederick William III, a nonsmoker.
1831	BAN LIFTED; MEDICAL USE	During a cholera epidemic in Berlin, doctors recommend smoking as an effective precaution against the disease. The minister of the interior states that while the epidemic prevails, smoking will be overlooked (1:230).
1832	BAN AFFIRMED	King Frederick William, gives the local police the right to forbid smoking in certain spots, under penalty of a fine. Smoking in public is regarded as a demonstration against the system of government (1:232).
1837	BAN LIFTED; MEDICAL USE	Another temporary suspension of the smoking prohibition occurs in Berlin when another cholera epidemic breaks out; by the end of the year, the prohibitions are enforced again.
1839	USE SPREADS	The governor of Berlin writes to the chief of police that he has noticed for some time a great increase in smoking in the streets and requests that this impropriety should be strictly fined in accordance with the king's order of 1832.
1844	BAN AFFIRMED	The old decree forbidding smoking within the walls of Berlin and in the Tiergarten is issued by a new governor.
1846, January	KING REACTS	The king writes to his minister of the interior that "The

CHRONOLOGY (Cont'd)

		offence of smoking in the streets of the capital, which is forbidden under penalty of law, has, we are informed, so increased of late that it appears necessary to pay more strict attention to such breaches of the law" (1:237). The minister determines to strictly enforce the law in order to stop "this defiance of police authority."
1846, March		The minister of the interior writes to the Berlin chief of police that the continued smoking in the streets of Berlin "impairs respect for the authorities" and that he expects the chief to "find means to punish this abuse."
1847	MILAN BOYCOTT PLANNED	Hatred of the Austrians (Tedeschi) grows in Italy. All the influential families of Milan head the Nationalist party in opposition to the Austrians. During the last few months of 1847, Giovanni Cantoni, a physics professor, conceives of the idea of a Smokers' Revolution, similar to that of a 1754 Milanese uprising against the Austrian tobacco monopolists. The idea is circulated, evoking the example of Americans who had agreed, shortly before the War of Independence, to give up tea in order not to pay the duty imposed by their English oppressors. The plan, aimed at injuring the Austrian monopoly, spreads quickly over the whole province, aided by the fashionable Club dei Leoni, whose members all adopt the plan (1:240-1).
1848, Jan. 1	"TOBACCO WAR"	On January 1, 1848, students demonstrate and chase smokers in the streets; the following day the disturbance grows more serious. Austrian soldiers are among those attacked, and they fight back.
1848, Jan. 3		On the third day, when some soldiers and civilians continue smoking, the Milanese take this as an act of defiance. The riots grow more serious still, and the soldiers take the offensive in large numbers, smoking and driving the populace out of cafés. Austrian Archduke Rainier grows alarmed and utters soothing proclamations, but the "tobacco war" spreads beyond Milan (1:241-2).
1848, Jan. 5	AUSTRIANS EVACUATE	Field Marshall Radetzky is forced to evacuate the city; people begin to smoke in the streets again.
1848, Jan. 8	BOYCOTT SPREADS	There are fights between students and officers at Pavia and Padua, and martial law is declared in Pavia. Field Marshall Radetzky announces, "I will not tolerate any secret society that insults and attacks peaceful smokers in the streets, and exercises unlawful power" (1:243-4).
1848, Jan. 29		The disturbance spreads to Venice, where, because of the boycott, stores of cigarettes pile up at the factory.
1848, Feb.	AUSTRIAN CONCERNS	Metternich, the Austrian Minister, grows concerned and decides that if the military are not sufficient, action should be taken against the Club dei Leoni. He writes: "This club forbids smoking. What right has it to do so? What it is aiming at is to arouse an inevitable resistance among those who are not under its orders, those who feel they have a right to smoke, so as to lay the blame for the disturbances on them....I would have closed the club at once" (1:245).

CHRONOLOGY (Cont'd)

		Archduke Rainier, however, accurately judges that feelings are not directed against smoking, but at the hated Austrian government and that the club's aim is the expulsion of the Austrians.
1848, Feb. 23	REVOLUTION	Revolution in Paris brings the July Monarchy to an end.
1848, Mar. 13		Revolution in Vienna brings the fall of Metternich.
1848, Mar. 16-25	BERLIN REVOLT; SMOKING BAN REPEALED	Revolution breaks out in Berlin. The people gather before the palace and demand lighter taxation, freedom of the press, and other concessions, including the repeal of the ban on smoking. Fearing a storming of the palace, their demands are granted. On March 23, the chief of police receives the following letter: "Your Excellency cannot be ignorant that the dearest wish of the Berliners has long been the repeal of the order against smoking in the streets." On March 25, the king allows smoking in public where there is no risk of fire (1:248-9).
1848, Mar. 22	ITALY REVOLTS	A general revolt occurs in Lombardy and Venetia, who ally with Piedmont in war against Austria.
1848, Aug.	ITALY DEFEATED	Austria defeats the Italian rebels and reoccupies Lombardy.
1851	SMOKING ENCOURAGED	The governments which profited from monopolies and taxes on tobacco now do all they can to further consumption. The secretary of the papal states issues an order that no one is to put any obstacle in the way of smoking and that the dissemination of antismoking literature would be punished by imprisonment (1:251; 3:249).

COMMENTARY

Symbolic protest -- Corti, History of Smoking (1931), p. 240.

> "Once in 1754 the Milanese had risen against those who farmed the tobacco monopoly, raised the price, and lowered the quality of the tobacco; they resolved to give up using tobacco and snuff so as to injure the monopolists and bring pressure to bear on them. Now they hit on the idea of ostentatiously stopping smoking, and thus injuring the Austrian monopoly.... Dr. Gerli undertook to circulate the plan. A manifesto was hastily drawn up, recalling the fact that Washington's fellow citizens, oppressed by the English tyranny, had agreed, shortly before the War of Independence, to banish tea from their tables, so as not to pay the duty imposed by the English. This first revolt led finally to the freedom and independence of the North American colonies.
>
>> Franklin's fellow citizens gave up their tea; do you imitate them and refuse Austrian tobacco. This is no vain attempt, but a duty, a master-stroke, and a sign of union and unity. We must make some sacrifice. Let everyone who would be free begin by casting off foreign vices; tobacco smoke injures the body, and sorts ill with the sweet, inspiring scent of Italy's flowers. Who will dare to assert that this habit has become a necessity to Italians? A nation that wishes to rise must love its country and help her as best it can."

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9

Tobacco (Cigarettes)

United States

1850-1945

BACKGROUND

John Rolfe introduced the cultivation of tobacco into Virginia in 1613. From then on, tobacco has assumed major social, industrial, economic, and medical roles in American history. Indeed, into the early 18th century, tobacco served as the currency of Virginia, and from colonial times onwards, tobacco regulation has been devised to help further the prosperity of the industry. For over 360 years, a variety of different regulations have been effected to control or influence its production (both by discouraging quantity and encouraging quality), sale, and, to a lesser extent, use (1:515). There has never been a time when tobacco was prohibited throughout the U.S., but bans have been put into effect in various places at various times. For example, in 1632 the General Court of Massachusetts forbade smoking in public under penalty of fine, and in the early 19th century an antitobacco crusade was launched in conjunction with the temperance movement (although with considerably less vehemence) (1:519; 2:107). By the Civil War, the movement against tobacco had ebbed, partly because the reformers had worn themselves out and partly because most of the tobacco consumed at that time was chewed. But following the Civil War, cigar smoking began to increase dramatically; soon thereafter, the habit of cigarette smoking began to spread not only among men but among women as well. As the temperance movement became revitalized in this period, the most concerted crusade to date was launched to promote the end of tobacco smoking.

CHRONOLOGY

1850's	INTRODUCTION	Cigarettes are brought home by American tourists from England; use spreads slowly at first. In 1850, it is estimated that about 19 cigars per capita are smoked (1:519).
1854		Dr. R.T. Trall reports that America has the highest per capita use of tobacco in the world; worse yet, New York society ladies "are aping the silly ways of some pseudo-accomplished foreigners, in smoking Tobacco through a weaker and more feminine article, which has been most delicately denominated cigarette" (2:112; 3:30).
1860	USE SPREADS	Cigar smoking rate rises to about 26 per capita (1:519).
1861-5	CIVIL WAR; MEDICAL USE	During the Civil War, despite some attempts to restrain the growth and manufacture of tobacco in the South, the anti-tobacco movement practically disappears, and the habit grows appreciably. Many consider tobacco essential to the well-being of soldiers; cigarettes, due to their convenience, become an established military ration (4:514; 5:119-120).
1862	TAXATION	The first federal excise (ad valorem) tax on tobacco is imposed on cigars to raise money for the Union war effort (3:46); the government seizes on the war effort opportunity to obtain tax money from cigarettes (1:516).
1864	TAX INCREASES	The cigar tax is raised and a separate tax is imposed on cigarettes; thereafter taxes are raised in 1865, 1866, and 1875.
1870's	INDUSTRY GROWS	Factories spring up in Durham, St. Louis, Richmond and Winston, and also in Northern cities such as New York to produce cigarettes as well as cigars and pipe tobacco. By

CHRONOLOGY (Cont'd)

		1870, an estimated 13.9 million cigarettes (136 per capita) are smoked (1:519).
1876-88	AD CAMPAIGN	Leading cigarette manufacturers undertake a major advertising campaign. Sales increase and cigar manufacturers counterattack, claiming that cigarettes are drugged with opium, that their paper is bleached with arsenic, that the tobacco is picked out of the gutters, and that they are produced by Chinese lepers (5:253-4). A fierce trade war also develops between the major firms manufacturing cigarettes.
1880-1914	OPPOSITION GROWS	Strong religious opposition grows among the Friends and the Methodists, who begin to insist that their ministers pledge abstinence from tobacco. A more hostile climate of opinion arises among some segments of society against cigarette smoking, particularly by women and children; the New York Times (1884) describes cigarette smoking as a vice (5:258).
1880	TAX STABILIZED	Taxes are stabilized at a rate accounting for 31% of the total federal tax receipts (1:516).
1885	USE INCREASES	Production climbs to over a billion cigarettes a year (2:141). The New York Times editorializes: "The decadence of Spain began when the Spaniards adopted cigarettes and if this pernicious habit obtains among adult Americans the ruin of the Republic is close at hand" (5:253).
1890	USE INCREASES; CARTEL FORMED	Production reaches 2.5 billion mark; the five competitive firms decide to form a tobacco cartel, the American Tobacco Company (2:144-5; 5:254).
	WCTU	Lucy Page Gaston of the Women's Christian Temperance Union becomes the leader and greatest warrior of the anticigarette campaign (4:514-515; 3:40).
1895-1921	PROHIBITIONS	Fourteen states (mostly in the Midwest) completely ban cigarettes; all other states, except Texas, pass laws regulating the sale of cigarettes and their possession by minors.
1897-1901	USE DECLINES	Temporary decline in consumption, generally credited to anticigarette legislation and increased taxation (5:259; 2:169).
c. 1900	USE INCREASES	Reform movement campaigns energetically but use increases; Harper's Weekly notes that hostility to tobacco is now concentrated on cigarettes (2:169).
1904	FARMERS OPPOSE CARTEL	Farmers in Kentucky and Tennessee form a protective association against the trust. Its militants (Night Riders) carry out a campaign of destruction and terror among the independent local planters (Hill Billies) who do business with the trust (2:154-8).
1907	ANTITRUST ACTION	Tobacco cartel now is so powerful that the government brings suit against the American Tobacco Company under the Sherman Antitrust Act (2:160-6).
1910-20	TAX INCREASE	Federal tax collection on tobacco products rises 500 percent, the greatest increase in any single decade (1:516).

CHRONOLOGY (Cont'd)

1911	CARTEL ENDED	Supreme Court finally reaches decision in favor of the government, and the cartel is dissolved; the cigarette business is divided among three major firms.
	USE INCREASES	Quantity of cigarettes marketed doubles that of 1896 (5:260). Between 1910 and 1919, an average of 24.3 billion cigarettes a year are produced, compared to 4.2 billion between 1900-1909 (6:231).
1912	ATTITUDES	A writing in Century magazine declares that the relation of tobacco--especially in the form of cigarettes--and alcohol and opium is a very close one: "Morphine is the legitimate consequence of alcohol, and alcohol is the legitimate consequence of tobacco. Cigarettes, drink, opium, is the logical and regular series" (7:180).
1913	NEW CIGARETTES; USE INCREASES	The first "modern" or "mild" cigarette, Reynold's Camel, is introduced and revolutionizes the cigarette industry; a rapid upward spiral of cigarette sales begins. Public attitudes begin to change to wider acceptance of cigarette smoking; habit and mode of use seems well suited to frenetic pace of urban life (4:515; 2:230-4).
1915	SMOKING CLINICS	Cigarette smoking is declared to cause delinquency and school failure. Free smoking clinics are established in some cities (4:514; 2:115).
1915-21	PROHIBITION REPEAL URGED	Weary of prohibitions, groups arise to raise funds and lobby against the antitobacco campaigners. The earliest such group is the Tobacco Merchants Association. Lobbying is active and successful (2:247-8).
1920	PROHIBITION	Evangelist Billy Sunday declares, "Prohibition is won; now for tobacco!" Lucy Gaston Page plans to run for U. S. President on an antitobacco platform (1:519).
1920's	ADVERTISING INCREASES: USE INCREASES	Tobacco industry begins to advertise on a massive scale using provocative slogans appealing to the youth market, women, weight watchers, and health seekers, medical opinion is still mildly favorable towards tobacco (2:251). Between 1920-1929, an average of 80 billion cigarettes a year are produced (2:231).
	FEMALE USE	Women accept cigarettes as a symbol of emancipation. In the cities, women are smoking in the early 1920's, and by the mid-20's use has spread to the smaller towns and villages. Women users are still attacked as immoral and are dismissed from jobs and colleges. In 1921, a bill is introduced to prevent women from smoking in the District of Columbia.
1920-27	PROHIBITIONS REPEALED	In 1920 and 1921, Kansas and Utah reaffirm tobacco prohibition but Arkansas and Tennessee repeal their largely ineffective statutes; by 1921 only five states maintain a ban on cigarattes. By 1923, Utah permits partial sales, and in 1924 North Dakota repeals its laws. In 1927, Kansas repeals its restrictions due to a campaign led by ex-servicemen--cigarette prohibition is over.

CHRONOLOGY (Cont'd)

1921	STATE TAXATION	Iowa becomes the first state to tax cigarettes, followed by 11 other states in 1930, and 40 states and the District of Columbia by 1950 (1:517) Between 1921-1940, such taxation primarily occurs in rural, conservative states who view smoking as a moral issue (9:263).
1926	EDUCATIONAL CAMPAIGN	The National Congress of the PTA resolves "to lend its force to the cause of eliminating throughout the U.S. the use of cigarettes by minors" (1:520).
1930's	HOSTILITY DECLINES: TAXATION BEGINS	By 1930, an estimated 976.61 cigarettes are smoked per capita, compared to .36 in 1870 (1:579). The antitobacco crusades decline in defeat; begin to see cigarettes as a rich source of tax revenue (4:515).
1941-45	USE INCREASES; TAXES INCREASE	In 1941, 27 states collect taxes in excess of $100,000 annually, usually at 2 or 3 cents per pack. In addition, there is a federal tax of 6 cents. During World War II, federal and state income from cigarette taxes soars to new heights as cigarette consumption rises dramatically, with demand sometimes exceeding supply. By the end of the war, smoking is not only an accepted behavior but is socially desirable, even necessary, in some subcultures (4:515; 2:269-70,276). Urban areas, where there is a heavy incidence of smoking, increasingly turn to taxation as a good revenue producer (9:263).

COMMENTARIES

Appeal of cigarettes -- Brecher et al., Licit and Illicit Drugs (1972), pp. 229-232.

> "Many factors contributed to this meteoric rise in popularity of the cigarette, including improved cigarette paper, automatic manufacturing machinery that lowered the price, and intensive nationwide advertising campaigns for the new cigarette brands. But the major factor was the appearance of a new type of tobacco--known variously as "bright," "flue-cured," or "Virginia"--which made cigarette smoke more readily inhalable. Cigarettes made of the new tobacco were called mild ("not a cough in a carload") because the smoke could be drawn deep into the lungs. The size of the new cigarettes was also admirably adapted to the nicotine dose most people prefer. It was therefore easier for women and children to learn to smoke cigarettes...
>
> "The explosive increase in cigarette smoking after 1910 can also be attributed in part to public-health campaigns of that era against the chewing of tobacco and its inevitable accompaniment, the cuspidor....
>
> "Perhaps because of their attractiveness to children and women, the new "mild" cigarettes aroused renewed hostility against nicotine. Beginning in the early 1900's, new anticigarette leagues, patterned on the politically potent antisaloon leagues, were founded and flourished both nationally and locally. Smoking by women and children was particularly assailed."

Effects of media campaigns -- Brecher et al., Licit and Illicit Drugs (1972), p.232.

> "The laws and campaigns of the 1960s against LSD and marijuana helped to popularize those drugs. In retrospect, it seems reasonable to conclude that the anticigarette laws and campaigns earlier in the century were similarly among the significant factors popularizing the cigarette. The prohibition served as a lure."

COMMENTARIES (Cont'd)

Appeal of cigarettes -- Wagner, Cigarette Country (1971), pp. 34-35.

"Cigarettes appealed to a more prosperous and refined public than chewing tobacco and pipes had reached, or even cigars. Cigarette trademarks had a certain hauteur...but for decades, the cigarette stayed far down on the totem pole in terms of consumption. The view persisted that they were too delicate to be a man's smoke and too masculine for women.

"In truth, smoking in any form was nicely attuned to the nervous urban civilization that was beginning to dominate American style. Tobacco supplied something romantic that was missing. The trade sensed this. As European apothecaries had promoted the medicinal use of the mysterious "heathen wound plant" in the 1600s, so the wholesalers and retailers of New York in the 1870s and 1880s called on the lore and lure of the American Indian and of the mysterious East to sell smokes."

The dynamics of taxation -- Wagner, Cigarette Country (1971), pp. 46-47.

"The dynamics of taxation played a part in the acceptance of cigarettes. The first federal excise tax on cigarettes had been imposed during the Civil War to raise money for the Union war effort. These taxes were increased and then, after the war, lowered. Foes of the cigarette pressed for higher taxes. By 1919, the federal rate had jumped to 6 cents a pack. State taxes were first imposed in 1921. Some lawmakers, both state and federal, favored taxation because they considered it to be a restrictive measure. Experience showed, however, that smokers, though they might grumble, would pay whatever taxes were assessed. By the time this acquiescence was generally conceded, the fast growth of revenue to states and federal government had raised cigarette taxes to a place of importance in government budgets."

Cigarette reform and immigrants -- Nuehring and Markle, Nicotine and norms: the re-emergence of a deviant behavior, Social Problems (1974), p. 515.

"Tennant (1950) suggested that part of the anticigarette sentiment may be explained by the fact that the first users of cigarettes were urban immigrants, a group at whom much prejudice was directed anyway. The status of the group who practices a behavior can influence whether behavior is seen as deviant; and just as prohibition was in part an attack upon immigrants (Gusfield, 1967) so, too, anticigarette crusading may have been in part rooted in class and ethnic conflict."

Cigarette reform -- Corti, History of Smoking (1931), pp. 266-267.

"Here and there, but chiefly in America, where the prohibition of drink still maintains a precarious existence, a demand for the abolition of smoking crops up from time to time, and a few states have adopted the movement, which originated from the American Women's Christian Temperance Union. There was a time when at every street corner in the United States one saw a poster depicting a mother with a baby in her arms and a cigarette in her mouth; there were no words--the mere presentment, it was hoped, would have a deterrent effect. But the antitobacco leagues, which are to be found in one form or another all over the world, have lived to see the very countries which tried to place difficulties in the way of smoking capitulate before the spread of the custom and the opposition of the populace...

"Though it is still possible to enforce the drink laws in the United States, by means of a gigantic organization, any proposal to deal in the same way with smoking would call forth such a storm of disapproval as would instantly sweep any government out of office that attempted it."

The failure of cigarette reform -- Brooks, Mighty Leaf (1952), p. 274.

"Most of the antitobacco crusades, from the period of James I on, were notable for their intolerance, their ignorance and more often than not their complacent stupidity. The campaigns inaugurated at the end of the nineteenth century, and resumed prior to World

COMMENTARIES (Cont'd)

> War I, were the most venomous and acrimonious of all. The spectacular growth of cigarette consumption immediately following the war infuriated opponents of the smoking habit and inspired them to intense efforts."

The failure of cigarette reform -- Sinclair, Era of Excess (1964), p. 180.

> "The success of the drys went to their heads. If they had succeeded in prohibiting liquor, why should they not succeed in banning other pernicious habits? More and more, the drys forgot the practical limits of the law and remembered only their view of the good of society. And in seeking beyond the practical and the possible they made themselves ridiculous. The history of the reform crusades against the cigarette and jazz are examples of the lengths to which the moral reformers would go in courting failure and jeers."

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10

Tobacco (Cigarettes)
United States
1945-1973

BACKGROUND

The damaging effects of tobacco on health have been emphasized, with little effect, by anti-tobacconists since the sixteenth century. But following World War II, scientific evidence gave added strength to their arguments. In 1939, the first scientific study was published linking lung cancer with smoking, and during the 1950s and 1960s, conclusive evidence was finally made available that cigarette smoking was the most important cause of lung cancer as well as a major factor in coronary heart disease, chronic bronchitis, emphysema, and other diseases. Publication of the 1964 Report of the Surgeon General's Advisory Committee provided the impetus to a renewed anticigarette campaign which not only attempted to inform people that smoking was dangerous--and, to many, morally reprehensible--and to persuade them to stop, but also sought to enact legislation to control the sale of cigarettes.

The stage was set for a major showdown with the nation's tobacco interests, one of the most powerful economic and political forces in America. The battle that ensued among health officials, cigarette reformers, the government, and the tobacco interests is a classic example of the difficulty of reducing levels of consumption when a substance has become an entrenched economic force within a society. The controversy has affected the lives of millions, either by modifying their habitual behavior or by threatening their means of livelihood. Furthermore, despite two decades of health warnings, the less-than-encouraging evidence illustrates the even greater difficulty of actually persuading habitués to give up their substance use.

CHRONOLOGY

1945	EARLY HEALTH WARNINGS	Mayo Clinic cautions against use of cigarettes by patients with vascular diseases or arterial injury. Dr. Alton Ochsner, a regional director of the American Cancer Society, announces parallellism between incidence of lung cancer and cigarette sales.
Early 1950's	WARNINGS INCREASE	Fourteen major studies (many conducted by Dr. E. Hammond of the American Cancer Society) report a link between cigarette smoking and serious diseases such as cancer and heart disease; sales still increase yearly (2:515; 1:145).
1953	TEMPORARY USE DECLINE	For the first time since the repeal of Prohibition, sales decline briefly for two years (1:7).
1954+	WARNINGS CONTINUE	Research reveals startling statistics; public health groups mobilize (1:16).
1955	USE DECLINE ENDS	Decline in cigarette sales ends.
1957	WARNINGS SUPPORTED	The American Cancer Society, National Cancer Institute, American Heart Association, and National Heart Institute support the 1954 research study findings and issue a report calling for government action. They conclude: "The evidence of a cause-and-effect relationship is adequate for the initiation of public health measures" (1:17).
	WARNINGS ATTACKED	Tobacco manufacturers point out the shortcomings of the research; stress correlation and not causality of the link between diseases and smoking and cite the need for environmental studies (1:18-9).

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CHRONOLOGY (Cont'd)

	CONGRESSIONAL RESPONSE	First Congressional committee hearings on Smoking and Health are held, aimed at defining the responsibility of the Federal Trade Commission for enforcing standards of truth in advertising relating to the effectiveness of cigarette filters. The hearings report that filters are not as effective as claimed (2:515; 1:24-5, 145).
1958	CONFLICT GROWS	The Tobacco Institute is formed by major cigarette manufacuters to counteract possible adverse political effects of the health studies (1:20-22, 43, 146).
	USE INCREASES	Cigarette sales continue to rise each year. The government responds slowly, partly due to the pressure of the Tobacco Institute, partly due to the weakness of public health interest groups (1:22).
1960's	TAXATION	State taxation rises dramatically, propelled by increasing revenue needs and the rationale that they were helping to discourage use (9:264).
	TAX EFFECTS	Use does not decline, nor are the needed revenues generated. Widespread bootlegging and smuggling of cigarettes begins; residents of areas with high taxes purchase bootlegged cigarettes or wherever they can find them at a reduced price (9:265).
1961	FEDERAL COMMISSION ADVOCATED	In June, major health associations request that a commission be appointed "to consider the responsibilities of government, business and voluntary agencies relative to the health hazards of smoking" (4:522).
1962	SURGEON GENERAL	On June 7, the Surgeon General's Advisory Committee on Smoking and Health is established to hold hearings and review the scientific literature on tobacco use and other factors that could contribute to ill health.
1962-64	REGULATION ATTEMPTED	Fifteen bills are introduced into Congress to restrict tobacco sales or convey health warnings; none is given serious consideration, due to the lack of public support, and the opposition of powerful Congressmen from the tobacco states. As a result, the public health interests intensify their efforts in the government bureaucracy and the courts (1:24-5).
1963	USE INCREASES	Tobacco sales total $8.08 billion, of which $3.3 billion go to federal, state, and local governments in excise taxes. A news release from the tobacco industry announces that "Tobacco products pass across sales counters more frequently than anything else--except money" (7:204).
1964	SURGEON GENERAL'S REPORT	On January 14, the Surgeon General releases the Advisory Committee's landmark report, Smoking and Health, which unanimously concludes that "cigarette smoking is a health hazard of sufficient importance in the U.S. to warrant appropriate remedial action" (1:44-5; 7:156).
	GOVERNMENT SUBSIDIES	A New York Times editorial observes that the government "continues to be the tobacco industry's biggest booster," stating that the Department of Agriculture lost $16 million in supporting the price of tobacco in the previous fiscal year (7:204).

CHRONOLOGY (Cont'd)

	CONTROL EFFORTS	In June, the Federal Trade Commission demands that cigarette packages carry a warning label by July 1, 1965 (2:516). The Public Health Service, followed by the Veteran's Administration and the Department of Defense, halts distribution of free cigarettes in hospitals (2:516; 1:146). Several states pass mild anticigarette legislation and the National Association of Broadcasters amends TV advertising code to discourage portrayal of smoking as a habit worthy of imitation (1:146).
	USE DECLINES	Sharp one-year decline in per capita sales occurs, then a steady increase until 1968 (1:7; 2:517).
1965	INDUSTRY COUNTERS; LABELING ACT	Tobacco industry succeeds in lobbying favorable legislation in the form of the Cigarette Labeling and Advertising Act. This act requires a health warning on cigarette packages, but prohibits the FTC and other federal agencies from regulating advertising, and nullifies state and local regulatory efforts (2:516; 1:115). It is called in a New York Times editorial "a shocking piece of special-interest legislation--a bill to protect the economic health of the tobacco industry." Later, an FTC report concludes: "There is virtually no evidence that the warning statement on cigarette packages has had any significant effect" (4:523).
	NCSH ESTABLISHED	National Clearinghouse for Smoking and Health is established within the Public Health Service.
1965-9	CONFLICT IN GOVERNMENT	FTC and other federal agencies such as the Federal Communications Commission work towards increased acceptance of the idea of requiring health warnings in advertising. The tobacco industry questions FTC authority to make policy decisions, demanding that such decisions be made by Congress, which is more sympathetic and responsive to the tobacco position. A power struggle develops between the FTC and Congress (1:130).
	TAX INCREASE	State taxes on cigarettes are increased; organized crime begins to take advantage of differential state taxes to smuggle cigarettes across state lines (2:517, 522).
	OPPOSITION RISES	The social opposition to smoking by both smokers and nonsmokers rises; normative rather than medical factors begin to play an important role in decisions not to smoke as smoking is labeled "annoying," "a dirty habit," and "morally wrong" (2:519-22).
1966	LABELING STARTS; ATTITUDES CHANGE	In accordance with the 1965 Labeling Act, health warnings appear on all cigarette packages. USPHS survey reveals that, nationwide, 71.3% of male cigarette smokers agree smoking was harmful to health; the percentage among females is even higher. However, despite increasingly negative views, cigarette consumption rises (5:234).
1967	ADVERTISING ATTACKED	The U.S. tobacco industry spends an estimated $250 million on advertising and is the single largest advertiser on TV (7:205). The FTC submits a report to Congress recommending that warnings should be required in cigarette advertising; the FTC also releases the tar and nicotine content of 59 brands of cigarettes. Senator Robert Kennedy introduces legislation to require warnings in all cigarette advertising (1:135, 148).

CHRONOLOGY (Cont'd)

	USE DECLINES	The government announces a .24% decline in cigarette sales to 545.6 billion; the American Cancer Society claims 21 million Americans have quit smoking (2:517-8; 6:87). Per capita annual consumption is now at 4,213 cigarettes, compared to 1,900 in 1900 (1:7).
1968	USE DECLINE	Cigarette sales decline to 528.9 billion.
1969	ADVERTISING CONFLICT INCREASES	The FTC unexpectedly proposes to ban cigarette advertising from TV and radio upon the expiration of the 1965 Act. The House Interstate and Foreign Commerce Committee holds hearings to see what progress is being made to develop safer cigarettes; recommends extending the law prohibiting regulation of advertising until 1975 (1:134, 137-8; 3:190).
	REASONS FOR NONUSE	HEW survey reports that only about 1 out of 4 nonsmokers listed medical or health reasons for their abstention. Normative reasons accounted for 17% of abstention among males and almost 50% among females (2:519).
1970-1971	USE INCREASES	In 1970, cigarette sales increase to 542 billion (from 528.9 in 1969). Compared to 1963, the number of cigarettes consumed has increased 3.4%, while per capita consumption is down 7.6%. Furthermore, this increase occurs despite a 40% rise in retail cigarette prices. NCSH surveys also suggest that during 1968-1970, the proportion of teenage users actually increases (5:234-6). In 1971, per capita consumption increases 5%, although sales are still below the 1960 level (2:518).
	CONGRESSIONAL BAN PASSED	Congressional hearings show that broadcasters are failing to monitor cigarette advertising themselves. Broadcasters respond by offering first to phase out advertising cigarettes with high tar and nicotine content, and then end all cigarette advertising by 1973. The tobacco industry retaliates by requesting antitrust immunity and threatening to withdraw all network advertising. To avoid granting antitrust immunity, the Senate Commerce Committee votes to ban all cigarette commercials from the air (2: 516).
	SMOKING ACT PASSED	Public Health Smoking Act of 1970 is passed, essentially reflecting the position of the antismoking interests.
1971	BETTER WARNINGS DEMANDED	FTC demands larger and more prominent health warnings on packages; the tobacco industry agrees to print tar and nicotine content in all cigarette advertising. In October, a U.S. District Court rules the congressional ban on advertising is constitutional. Taxes on cigarettes are raised 40% (6:87).
1973	SALES INCREASE	Cigarette sales continue to increase; by 1973, they reach a high of $600 billion (6:87).

COMMENTARIES

Tobacco power -- Wagner, Cigarette Country (1971), pp. 120-121.

> "Tobacco had become a powerful force in American politics {by 1960}. The tobacco coalition included not only the industry itself but a clientele of millions of people who annually smoked about 494.5 billion cigarettes and other tobacco products worth nearly $8 billion. The recipients of that money included manufacturers, ad agencies, the mass media, farmers, shopkeepers, and tax collectors. By 1962, tobacco ranked fourth in the overall value of cash crops grown by American farmers....In seven states, tobacco receipts exceeded 10 per cent of total cash receipts from all commodities. Attempts to discourage smoking would therefore affect the lives of millions of people with profound economic and political consequences.
>
> "The tobacco subsystem had succeeded in keeping the health question a low-priority item on the government's agenda by playing one government agency off against another. Tobacco policy was controlled in a cooperative spirit by a coalition of certain segments of Congress, the bureaucracy, and industry. Like hundreds of others in Washington, the tobacco subsystem cut across institutional lines and included the paid representatives of tobacco-growers, marketing organizations, and manufacturers. The tobacco leaf was woven so deeply into the fabric of American life that it was used as a motif in the decoration of columns in the Capital. Congressmen representing tobacco growing states were leading members of four subcommittees, including two appropriations committees and two committees in each house of Congress handling tobacco legislation. All of these people in the agencies and in Congress knew each other well, and, as long as there was not public outcry, certain programs, such as tobacco price supports and export promotion, were carried on without interference.
>
> "Tobacco power was thus firmly entrenched and well supported. Each medical discovery and government response had been met by a reaction from the manufacturers and their advertisers. The tobacco subsystem appeared inpenetrable to the demands of the antismoking forces."

The politics of the controversy -- Fritschler, Smoking and Politics (1969), p. 2.

> "The politics of cigarette labeling demonstrates how institutions with separate responsibilities in the framework of the Constitution cooperate, conflict, and form temporary alliances to achieve policy goals. Further, the controversy illustrates the central role of the bureaucracy as policy initiator and policymaker in modern society....Frequently, when the issue involves matters of technical complexity the bureaucracy plays the leading role, but there is no fixed distribution of power. And even though one institution might play a leading role, it is clear that the policy process cannot function when one of the institutions encounters concentrated opposition from another. The Federal Trade Commission discovered the truth of this statement when it encountered a Congress hostile to its proposals for cigarette health warnings."

Opinions of the 1970 advertising ban's effects -- National Commission on Marihuana and Drug Abuse, Control of marihuana, alcohol, and tobacco, in Marihuana: Signal, App. 1 (1972), pp. 525-526.

> "Some observers marvel that the bill [1970 ban on advertising] was passed in spite of massive pressure that had been brought to bear against it and against the regulation of cigarette advertising generally, by the tobacco industry, the broadcasting industry, and the lobbyists and their political allies. This was a combination that for years had proved invincible against a counterforce of scientists and public health and public interest advocates who, armed with formidable statistics on the damage to health and life caused by cigarette smoking, had sought to protect consumers by requiring all cigarette advertising to provide adequate warnings of these dangers.
>
> "There are those observers, on the other hand, who do not view the ban of cigarette advertising on television and radio as such a success for the consumer. Rather, they cite the statistics on consumption in other countries to point up the fact that bans on advertising do not reduce sales....
>
> "Other observers can see a gradual reduction in cigarette consumption as a result of a prohibition on advertising; some feel a ban on advertising merely makes it difficult to

COMMENTARIES (Cont d)

launch a new brand. Others predict that the ban will eliminate the social acceptability of the habit although consumption will not go down.

"The 'live dangerously novelty' has also been identified as a possible cause for gains in consumption; 'such a philosophy might well be prevalent among the young, the very ones that antismoking advocates are most anxious to protect."

The continued increase in consumption -- Rublowsky, The Stoned Age (1974), p. 87.

"This rise {in cigarette consumption between 1963-1973} occurred despite unprecedented governmental and health agency attempts to curb the habit. Taxes on cigarettes were raised 40%; cigarette advertising was prohibited on television; warnings had to be prominently displayed on all cigarette packs and advertisements.

"Nothing helped. Smokers kept right on buying cigarettes at the same astronomical level. As far as the tobacco companies were concerned, their financial position was improved, if anything. They no longer spent millions of dollars on television advertisments. Actually, a similar experience in Italy, where all cigarette advertising was banned, had similar results. Tobacco sales were in no way affected by the prohibition!

"Cigarette smoking had been considered no more than a particularly pernicious habit. We all knew that it was a difficult habit to control, but no one considered tobacco a real drug. Our experience with smoking in relationship to its health hazards has unquestionably refuted this concept. Smokers are addicted, and they may be addicted to the most powerfully compulsive substance we know."

Effects of the Surgeon General's Report -- Brecher et al., Licit and Illicit Drugs (1972), p. 235.

"On January 11, 1964, a turning point was reached. The Report of the Surgeon General's Advisory Committee on Smoking and Health, published amid unprecedented worldwide fanfare in the mass media, convinced even most smokers that cigarette smoking shortens human life, causes lung cancer and other forms of cancer, and exacerbates heart disease, emphysema, bronchitis, and a number of other illnesses--gravely increasing the risk of dying of them.

"For a brief few weeks, this report had a major nationwide impact. Within a few days after its publication, some chain supermarkets announced that cigarette sales had fallen 20 to 25 percent....[This] 20 percent decline in number of cigarettes smoked may have represented a 25 or even 30 percent decline in number of smokers still smoking.

"But the curtailment was short-lived; what has been called 'the Great Forswearing' of January and February 1964 was followed by the 'Great Relapse' of March--further evidence that in the twentieth century, as in the sixteenth, nicotine remained an addicting drug. Within a few months cigarette consumption was back almost to pre-1964 levels.

"The failure of the Report of the Surgeon General's Advisory Committee to curtail cigarette smoking more than briefly was naturally a disappointment, but health agencies did not despair. The United States Public Health Service, the American Cancer Society, and countless other national and local agencies launched campaigns with three major and related goals: to inform people that cigarette smoking is dangerous, to persuade people to stop smoking, and to help those who were having trouble in stopping. The possibility that nicotine, for a large percentage of users, might be an addicting drug--the possibility that many people might not be able to stop, even though they wanted to, decided to, and tried to--was not given serious consideration. It was during the same years 1964-1970, it will be recalled, that the public was similarly being assured that heroin addiction is curable.

"Judged by their effect on attitudes, the antismoking campaigns launched following the 1964 Report of the Surgeon General's Advisory Committee were notably successful....

"Even many confirmed cigarette smokers were persuaded by the campaigns that smoking is a dirty habit, harmful to health and morally reprehensible. But the prevalence of negative attitudes toward smoking among smokers, unfortunately, had little effect on their actual smoking....

"The Report of the Surgeon General's Advisory Committee and the subsequent anticigarette campaigns did have one major effect, however. Vast numbers of smokers turned from plain to filter-tip cigarettes and from high-tar-high-nicotine to low-tar-low-nicotine brands.

COMMENTARIES (Cont'd)

While the data are not conclusive, it seems probable that the increase in number of cigarettes smoked per smoker was related to this switch; some smokers no doubt increased their daily cigarette quota to compensate for the smaller amount of nicotine in each cigarette. Other smokers no doubt compensated by taking more puffs on each cigarette and leaving shorter butts."

The smoker as deviant -- Nuehring and Markle, Nicotine and norms: The re-emergence of a deviant behavior, Social Problems (1974), pp. 524-525.

"The cigarette controversy in the United States has reflected a number of theoretical principles familiar to students of the sociology of law. We can see symbolic import in the anticigarette legislation; we can observe instances of moral entrepreneurship; and we can observe instances in which organizations' growth, maintenance, or adaptation has been enhanced by supporting the anticigarette effort. It is also clear that, for the industry and its allies, there have been financial interests at stake which have promoted the intense conflict between tobacco and health.

"The history of the current anticigarette movement shows that almost all coercive reform measures have been directed toward the makers and especially the advertisers of cigarettes. These groups have obviously been in contention with the health norms, publicly denying the need to avoid smoking to maintain health. Such challengers of norms have become enemies of the reformers' culture and may anticipate coercive, legalistic reform measures. However, the precedent of the Prohibition fiasco will undoubtedly rule out a complete ban on cigarette sales at the national level; and the power of the tobacco industry, if nothing else, would severely impede the type of antismoking legislation at the state level noted earlier in this century....Spurred by...successes, antismoking forces are now agitating for new and stronger coercive legislation. Thus, efforts in the near future to regulate the sale of cigarettes should serve as good indicators of the probable success or failure of the whole antismoking movement.

"With respect to possession of cigarettes, rather than their sales, the self-labeling behavior on the part of smokers...suggests a posture described by Gusfield as the 'repentant deviant,' wherein the violator admits the reprehensibility of his act and thus may persist in his behavior without threatening the legitimacy or domination of the norms he violates. Repentant deviants will be approached as individuals to be helped to conformity--that is, reform will be assimilative, not legalistically coercive.

"Thus crimnialization of the smoker in the near future seems unlikely, due to his large numbers and distribution throughout the social strata, his otherwise blameless life style, and his posture as a repentant deviant....

"However, the recent restrictions directed at the smoker are clearly coercive reform measures, suggesting the possibility of an *emerging* redefinition of the smoker as an "enemy" or as someone who rejects the reformer's values and efforts and does not really want to change. Activities of the past few years and the next few years may show that, once again, the sale and possession of cigarettes is emerging as a deviant behavior."

Effects of cigarette taxation -- Herron, Socioeconomic effects of increasing state cigarette taxes, In Borgatta and Evans, eds., Smoking, Health, and Behavior (1968), pp. 263-267.

"The 1960s really opened up the race between states in increasing their cigarette tax rates. Taxation administrators soon discovered that legislators were not hesitating to vote for a rate increase on cigarettes for two quite contradictory reasons. First, the states needed additional revenue at an ever-increasing rate, and, second, they were helping to discourage the use of cigarettes, either for health or for moral reasons...

"...What effect has there been...of these tax rate increases? This is an area of the greatest concern. What really happens is that the smoker normally does not stop smoking because of high prices, but, instead, buys cigarettes wherever he can find them at a reduced price. He has many alternatives. If he is a communter who lives in one state and works in another, he can buy cigarettes in the low-tax state and carry them into the high-tax state.... Another alternative is to buy bootlegged cigarettes from a 'pusher'...

"Increased state cigarette tax rates thus accomplish neither of the avowed purposes. First, they have not produced the estimated increase in revenue, and, second, they have not accomplished a reduction in smoking, as evidenced by federal tax paid removals. In addition to

COMMENTARIES (Cont'd)

not accomplishing either of the desired objectives, tax rate increases have created another set of problems and results. (1) They have increased the cost of collection of whatever revenue is obtained. (2) They have led a large group of citizens to knowingly violate laws. "Tax increases thus, as prohibitors, parallel the Noble Experiment, which not only made us a nation of law violators, but spawned in the 1920's the organization of criminals which we still have with us today. Now the syndicate's activities, which include every known vice in the world, can add the bootlegging of cigarettes, for safe and fat profit."

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11

Coffee

Arabia and Turkey

1450-1625

BACKGROUND

No one knows just when the coffee was first drunk. Indigenous to Ethiopia, it was originally consumed by chewing the beans or making an infusion of the leaves (10:8-16). It may have been known to the Arabs as early as the 6th century; but the first mention of it is by the Arabian physician Rhazes or Rāzī (850-922). Rhazes, who inaugurated the classical period of Arabian medicine, relates that bunchum, which is believed to be coffee, "is hot and dry and very good for the stomach." Avicenna or Ibn-sina (980-1037), the great Arabian philosopher and physician, also explains the medicinal uses and properties of bunchum (1:8). Until the 14th century, coffee use was essentially limited to medicinal purposes; it was not widely consumed nor systematically cultivated; it was high priced. By the 14th century, however, the technique of roasting and grinding coffee beans for drinking had been developed, and coffee was intensively cultivated in the Yemen district of Arabia, where at first it was zealously guarded. As the cost of coffee then declined, its general use spread (2:27).

Coffee is often spoken of as the "wine of Islam." Evidence even suggests that early Mohammedan churchmen were seeking a substitute for the wine forbidden them by the Koran when they discovered coffee. The Arabic word for coffee, qahwah, is the same as one of the words used for wine. Undoubtedly, the ban on wine accounted for much of the phenomenal rise in popularity of coffee drinking in Islamic countries. This popularity is attested to by the large number of legends which claim for the Mohammedan faithful the honor and glory of the first use of coffee. One legend relates how it was first presented to Mohammed himself by the Archangel Gabriel, at the command of Allah, to relieve the prophet of his excessive somnolence (2:11). The most popular of these legends relates how an Arabian goatherd, disturbed by the peculiar behavior of his flock, observed that they had eaten some berries, which he himself then partook. Immediately exhilarated, he rushed to tell the Mohammedan prior who prepared the beverage for himself and his dervishes in order to keep them awake during the long night prayers in the mosque. The beverage was called qahwah, that which stimulates or suppresses the appetite for food. According to the legend, the fame of the "wakeful monastery" spread rapidly, and the magical coffee berry soon "came to be in quest throughout the whole kingdom; and in progress of time other nations and provinces of the East fell into use of it" (2:3-10; 1:10).

Coffee initially spread as an aid to religious devotion; as its popularity mushroomed, secular coffee houses were established. Its stimulating effects were particularly appealing to the Islamic intellectuals, and the coffee house soon became the central meeting place of a town's populace. But as its popularity spread, conservative church leaders and scholastics began to question whether it, too, was not forbidden by the Koran because of its "similarity" to wine as an intoxicant and because coffee beans were burnt like charcoal, which was also forbidden. Coffee and coffee houses became subject to violent attempts at repression; most of which were directed not so much against coffee per se, as against the coffee houses as centers of free thinking and unrest.

One other fascinating aspect of the history of coffee in Arabia is its relationship to another substance which was becoming popular at the same time and was also accused of being contrary to the Koran--khat. Derived from the leaf of Catha edulis, a tree grown in the mountainous regions of Yemen, Ethiopia, and Kenya, khat juices produce a mild stimulating effect which is very similar to that of coffee, and the history of the two stimulants were and are closely intertwined (3:242; 4:100, 107; 6:370). There is disagreement over the origin and spread of khat use, but many of the legendary stones regarding it are similar to those of coffee (6:353). Khat is believed to have been used in a drink in Yemen before coffee; it too was used in the observations of prayer, often combined with coffee in order to stay awake. Later its use was extended to nonreligious acts such as attending funerals, weddings, and business gatherings. Finally, it was also considered a powerful medicine--in Ethiopia it is believed it can cure 501 different kinds of disease (6:370). The role that khat played in paving the way for coffee use, as well as the possible role the use of the two played in the original persecution of coffee houses, still needs further investigation.

Coffee, Arabia and Turkey, 1450-1625

CHRONOLOGY

c.1450	INTRODUCTION IN YEMEN	According to Sheik Abd-al-Kadir (writing in 1587), coffee is not known in Yemen before 1450 when the prominent mufti of Aden, Sheik Gemaleddin becomes acquainted with it on a journey to Ethiopia. Falling ill upon his return to Aden and remembering the coffee, he sends for some in the hope of finding relief. He recovers from his illness and because of its sleep-dispensing qualities, he sanctions the use of the drink among the dervishes "that they might spend the night in prayers or other religious exercises with more attention and presence of mind" (1:12). Coffee cultivation is apparent in Yemen around the 14th century, but it is in the mid-15th century that coffee use begins spreading most rapidly. The sheik's endorsement may have played an important role in this spread as it is the first reliable date for the history of coffee. (1:12)
1470-1500	USE SPREADS RELIGIOUS SECULAR	Coffee is introduced into Mecca and Medina by dervishes for religious purposes, as in Aden. Coffee becomes so popular in Mecca that inhabitants ignore the restrictions of holy men and begin to drink publicly in secular kaveh kanes (coffee houses). Use also spreads into Persia (1:12-13). Coffee becomes a much desired luxury of royalty and nobles (10:18).
1510	CAIRO; RELIGIOUS USE	Coffee reaches Cairo, where again it is used by dervishes from Yemen in their religious ceremonies. During these ceremonies, the coffee bowl is passed to lay members of the congregation; coffee becomes so associated with the act of worship that it becomes a part of all religious and solemn festivals.
1511	PROHIBITION ATTEMPTED	Kair Bey, governor of Mecca for the sultan of Egypt, is outraged to find some dervishes drinking coffee in a mosque in order to be able to carry out the night's ascetic exercises without falling asleep. He resolves to "put a stop to the coffee-house abuses." The chief count in his indictment is that "in these places men and women met and played tambourines, violins, and other musical instruments. There were also people who played chess, mankala, and other similar games, for money; and there were many other things done contrary to our sacred law...." (1:13). He publishes an edict forbidding public and private sales of coffee, orders the coffee houses to be shut down and all the coffee burned. A man convicted of drinking coffee is led through the town mounted on a donkey. Coffee itself is declared mekruh, neither forbidden nor permitted, but undesirable (2:28-33).
	PROHIBITION REPEALED	A week-long "reign of terror" follows, but the unpopular edict is evaded; coffee is drunk secretly even though violators are punished. The sultan of Cairo, an avid coffee drinker, disapproves of Bey's "indiscreet zeal" and orders the edict revoked, declaring coffee is harmless and admissable. (1:14; 2:32).
1517	USE IN CONSTANTINOPLE	Coffee reaches Constantinople when Sultan Selim I annexes Arabia and Egypt to the Ottoman Empire. In the unified Turkish realm the importance of coffee increases; it is used to

CHRONOLOGY (Cont'd)

		refresh and invigorate both warriors and philosophers. Women begin to take up coffee drinking; in Turkey, refusing coffee to a wife becomes valid grounds for divorce. Rapidly becoming a regular article of diet, it is declared to be nutritive and of equal importance with bread and water (2:34).
1521		The export of coffee from Yemen to seacoast towns increases.
1523	HEALTH WARNING	A physician in Cairo raises the question of whether coffee should be forbidden because it is "very pernicious to health" --"notwithstanding" that it causes "no small disorders" (1:15).
1524	TEMPORARY BAN IN MECCA	Renewed civil disorders in Mecca cause the coffee shops to be closed again, but private drinking is still allowed. The shops are soon relicensed and from that time on they are not disturbed (1:14).
1530's	USE SPREADS	Coffee spreads through Syria, to Baghdad and Teheran.
1534	TEMPORARY BAN IN CAIRO	Increasing public drinking in Cairo causes considerable consternation. Physicians generally approve of its use; preachers oppose it. In 1534, a fanatical preacher denounces coffee, declares that a coffee drinker cannot be a good Mohammedan, and leads a mob to wreck the coffee houses. Public opinion is aroused. After consulting with learned physicians, the chief judge decides to "check the indiscretions of ignorant preachers" and approves of coffee. However, outbreaks of religious agitation often still occur. (1:15)
1542	BAN	Suleiman the Great, son of Selim I, at the request of a favorite court lady, forbids the use of coffee, but to no avail.
1554	COFFEE HOUSES IN CONSTANTINOPLE	Under Suleiman's reign, the first coffee houses are established in Constantinople. Despite attacks by religious and political factions, coffee drinking and coffee houses increase. Used by all levels of society, the coffee houses reach their highest development in Constantinople and become known as "schools of wisdom." Demand outstrips supply and coffee houses become more and more luxurious. (1:16; 3:250)
1570	DEBATE IN CONSTANTINOPLE	Religious zealots in Constantinople, jealous of the increasing popularity of the coffee houses, claim that roasted coffee is a kind of charcoal, which is forbidden by the Koran as unsanitary. The priests decide coffee is forbidden by law.
1580	COFFEE HOUSES CLOSED	Amurath III orders the closing of all coffee houses on religious grounds, classifying coffee with wine.
	BAN IGNORED: COFFEE TAXED	The order is not strictly observed, Ottoman "speakeasies" spring up; coffee drinking continues behind closed shop doors and in private houses. Gradually the coffee houses are reestablished; finally, a new mufti declares that coffee is not a coal and the drink is not forbidden. The coffee houses become handsome sources of revenue for the grand viziers.

CHRONOLOGY (Cont'd)

1582-3	USE SPREADS	The physician Rauwolf of Augsburg, during his trip to the Levant (1573-8), finds coffee used by the entire population of Asia Minor, Syria, and Persia as if it were an ancient custom (Travels, 1583). He becomes the first European to mention coffee, which he calls chaube. (1:8; 3:249-50)
1587	COFFEE PRAISED	The first authentic account of the origin of coffee is written by Sheik Abd-al-Kadir, who praises it in a hymn: "O coffee, thou dost disperse cares and sorrow, thou art the drink of the friends of God, thou givest health to those who labor to obtain wisdom" (3:255). He observes that lawyers, students, night travelers, artisans and others who worked at night took to drinking coffee to escape the heat of the day and even gave up a drink rapidly becoming popular--khat (1:12).
1610	USE PATTERNS	During his travels through the Levant, George Sandys describes Turkish coffee drinking: "Although they be destitute of Taverns, yet have they their Coffa-houses, which something resemble them. They sit there chatting most of the day; and sippe of a drinke called Coffa (of the berry that it is made of) in little China dishes as hot as they can suffer it: blacke as soote, and tasting not much unlike it....Which helpeth, as they say, digestion, and procureth alacrity..." (9:66).
c.1625	POLITICAL BAN	Grand Vizier Kuprili, under Murad (Amurath) IV, decides during a war that coffee houses are hotbeds of sedition and that they should be closed for political reasons; however, he allows the wine taverns, forbidden by the Koran, to remain open. Severe penalties are established.
	BAN REPEALED	Violations of the law are widespread and later Kuprili assures himself that the coffee houses are no longer a menace to his policies, and he permits the free use of coffee (1:16-7).

COMMENTARIES

The 16th century "coffee bugaboo" -- de Ropp, Drugs and the Mind (1976), p. 140.

> "No sooner did coffee become popular in the East than it brought down upon itself, as usual, the wrath of various officious characters who declared it to be the very brew of the Devil and did everything they could to suppress its use. In fact the "coffee bugaboo" in sixteenth-century Egypt caused almost as much fuss as has the 'marihuana bugaboo' in contemporary United States. Sale of coffee was prohibited; wherever stocks of coffee were found they were burned. Those who were convicted of having drunk coffee were led through the town mounted on a donkey; its use was declared contrary to the spirit of the Koran. All this fuss only had the result of interesting more people in the brew and its use spread steadily. Finally, all laws against it were repealed, in fact so far did the pendulum swing in the opposite direction that a Turkish law proclaimed that refusal of a husband to give his wife coffee was legal grounds for divorce."

Coffee: the radical drink -- Ukers, All About Coffee (1935), pp. 15, 17.

> "One of the most interesting facts in the history of the coffee drink is that wherever it has been introduced it has spelled revolution. It has been the world's most radical drink in that its function has always been to make people think. And when the people began to think, they became dangerous to tyrants and to foes of liberty of thought and action.

COMMENTARIES (Cont'd)

Sometimes the people became intoxicated with their new found ideas and, mistaking liberty for license, they ran amok, called down upon their heads persecutions and many petty intolerances. So history repeated itself in Cairo, twenty-three years after the first Mecca persecution" (p. 15).

"Even in those days it was not possible to make people good by law. Paraphrasing the copybook, suppressed desires will arise, though all the world o'erwhelm them, to men's eye. An unjust law was no more enforceable in those centuries than it is in the twentieth century. Men are humans first, although they may become brutish when bereft of reason. But coffee does not steal away their reason; rather, it sharpens their reasoning faculties. As Galland has truly said: 'Coffee joins men, born for society, in a more perfect union; protestations are more sincere in being made at a time when the mind is not clouded with fumes and vapors, and therefore not easily forgotten, which too frequently happens when made over a bottle" (p. 17).

Coffee and khat -- Blum et al., Society and Drugs (1969), pp. 100-101, 107.

"Coffee was probably indigenous to Aybssinia but was first placed under cultivation in Arabia in the 1300's. It was initially employed...during religious ceremonials (by dervishes in particular, says Lewin, 1964)--a practice resisted by the conservative priesthood, who argued that it was intoxicating and therefore religiously prohibited by the Koran. The use of coffee together with khat developed in the Arab world, the belief being that the two had a mutually enhancing (potentiating) effect. Both substances became disapproved especially as the coffee house itself developed. Throughout the Arab Near East, these coffee centers became institutionalized as places where men with leisure time congregated. In urban areas these centers became places not only for political discussion but, in the eyes of religious and political authorities, places in which rebellion and opposition were fomented. Thus, both coffee-house frequenters and coffee-house owners became subject to criminal penalties, including death. In spite of prohibition of an extreme sort, coffee drinking spread in the Arab world" (pp. 100-101).

"In Ethiopia and East Africa, khat was eaten before 1200 A.D. but initial dates of its use are unknown....Its eating was and is an individual rather than a ritual activity, although it was favored by mystics and, early, by intellectuals. Khat has also been employed in folk medicine....Ascetics used it as an aid in austerity. El Mahi says its use as a social facilitator is valued to promote good feeling and exchange in social intercourse. As so often occurs with drugs, the khat user may employ other substances either in sequence or simultaneously--particularly coffee and tobacco and, perhaps, hashish. Opposition to khat use has been based on religious grounds, some Moslems contending it is an intoxicant and therefore forbidden; on pragmatic grounds it has been opposed since some chronic users display irritability and depression; it has been opposed on medical grounds--by Lewin, for example--because of cardiac disturbance, loss of appetite, loss of sexual interest, and other distress when it has been used excessively" (p. 107).

Symbolic opposition -- Blum et al., Society and Drugs (1969), pp. 112-113.

"In regard to the natural stimulants, two different historical patterns of use suggest themselves. One shows development of use in advanced societies (China, India, Europe) with no real evidence for ceremonial practices, either religious or medical, except as incidental to popular noninstitutionalized use. The use of tea or cocaine in medicine, of tea by priests or in aesthetic social rituals, or khat or coffee by dervishes is as such a secondary ritual. Tea, coffee, cocaine, betel, khat--as well as cocoa and kola nut, maté, and so on--are in the category of popular or casual drugs. Coca and kava are different, for originally in native cultures their use was only in association with magico-religious practices conducted by authorities. These substances were also status symbols in the sense that authorities controlled access and employment. With both drugs, as societies changed diffusion occurred, so that use became more popular and uncontrolled and no longer ritual--that is, the process of secularization took place. It is interesting that conquering colonials--whether represented by missionaries or conquistadores--opposed these drugs. We

COMMENTARIES (Cont'd)

> wonder whether the opposition was as symbolic as the use....What we are suggesting is that colonial opposition was itself symbolic, since unified, 'occupying-power' opposition to a mild stimulant occurred only--as far as we can see--when the stimulant represented ceremonials integral to the native culture's religious and political authority, rather than when the stimulant was much more widely used but not in ways sacred to that local authority. It was, of course, functional as well. One sees something of the same thing in the Moslem mullah-sultan decrees against coffee; there the drug was--according to El Mahi (1962)--a convenient focus when the attack was actually against those groups with feared political potential whose members drank coffee. Lewin disagrees and suggests that opposition was merely based on misinformation which indicated that coffee was intoxicating. It need not be an either/or situation; quite likely, misinformation is necessary to justify an attack which also has latent--or at least unstated--sociopolitical implications."

Coffee in Arabia: an overview -- Brecher et al., Licit and Illicit Drugs (1972), pp. 196-197.

> "The introduction of caffeine drinks into countries that had not previously known them--like the introduction of other exotic drugs such as nicotine and marihuana--aroused a sense of deep moral outrage and evoked efforts to repress the new drug. The Mohammedans of Arabia, for example, first used the newly introduced coffee to help them stay awake during prolonged religious vigils. This use as a devotional antisoporific stirred up fierce opposition on the part of the strictly orthodox and conservative section of the priests. Coffee by them was held to be an intoxicating beverage, and therefore prohibited by the Koran, and severe penalties were threatened to those addicted to its use. An early Arabian writer summed up: "The sale of coffee has been forbidden. The vessels used for this beverage...have been broken to pieces. The dealers in coffee have received the bastinado, and have undergone other ill-treatment without even a plausible excuse; they were punished by loss of their money. The husks of the plant...have been more than once devoted to the flames, and in several instances persons making use of it...have been severely handled. Notwithstanding threats of divine retribution and other devices,' however, 'the coffee-drinking habit spread among the Arabian Mohammedans, and the growth of coffee and its use as a national beverage became as inseparably connected with Arabia as tea is with China'."

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12

Coffee
England
1600-1800

BACKGROUND

As Ukers (1:49) observes, one of the most picturesque and important chapters in the history of coffee is that of the London coffee houses of the 17th and 18th centuries. Coffee use came to England during one of the most turbulent period of political, social, economic, and religious unrest in its history. The use of both alcohol and coffee was greatly influenced by these conditions. Alcohol abuse increased dramatically (see persp. 14). Coffee was recommended as a panacea for personal ills, including drunkenness; as in Arabia, the coffee houses soon became forums for the great political debates of the age. Again, the attacks on coffee often had less to do with the product than the setting in which it was consumed.

In 17th century England great conflicts occurred over constitutional self-government, the divine right of kings, and religious tolerance, conflicts which determined the subsequent character of modern England and launched into contemporary history the great movements of liberalism and representative institutions. Rapidly in succession came the Parliamentary and Puritan rebellions, civil war, the execution of King Charles II, the establishment of the republican Commonwealth, the restoration of the Stuarts, the Glorious Revolution, and the expulsion of King James II. It was an era when advanced political debates were carried on throughout the country over natural rights, the rights of Englishmen, written constitutions drawn up by the people, and democratic sufferage. It was the age of Hobbes and Locke.

With considerable exaggeration, Ukers and others have called coffee "the drink of democracy" and "the home of liberty." But it is true that throughout this period of unrest, the coffee houses flourished as centers where men met and discussed the great issues of the day--usually in support of the republican cause. Soon the coffee houses served social and political purposes that transcended their functions as coffee serving establishments, and just as soon the English monarchy tried to suppress them. The monarchy eventually came to terms with the coffee houses, yet it was only after the political turmoils of the period had ended, and the coffee houses had become more social than political centers, that the attacks finally ceased.

Another interesting aspect of the history of coffee houses in England is the antagonism they engendered among the brewers. The economic threat coffee posed to those with vested interests in liquor consumption was considerable. This threat played an even more important role in the response to coffee in Prussia (see persp. 13).

CHRONOLOGY

1600-25	INTRODUCTION	Coffee is introduced into England during the first quarter of the 17th century and is described by many writers and travellers: William Parry (1601), John Smith (1603), Sam Purchas (1607), William Biddulph (1609, 1625), George Sandys (1610), Edward Terry (1616), Francis Bacon (1624, 1627), Richard Burton (1632), Thomas Herbert (1628), and Henry Blount (1634) (1:31-36).
	MEDICAL USE	It is introduced first as a medication and panacea, particularly as a quickener of the circulation, and a cure for drunkenness, which was rife in England at the time (3:90-92).
1606	DRUNKENNESS SPREADS	Drunkenness increases; Parliament passes an "act to repress the odious and loathsome sin of drunkenness."
1640	REBELLION	The Long Parliament rebels against King Charles I and Stuart absolutism.

CHRONOLOGY (Cont'd)

1642-8	CIVIL WAR	Puritan rebellion and Civil War.
1649	COMMONWEALTH	Civil War ends with the execution of King Charles I and the establishment of the Commonwealth under Cromwell; Democratic ideas spread throughout England.
1650	COFFEE HOUSES OPEN	In 1650, a Lebanese opens the first coffee house in Oxford, where the drink gains favor among students who form the Oxford Coffee Club, the origin of the Royal Society. In 1652, Pascal Rosea, a Greek, opens the first coffee house in London. (2:17; 1:38; 3:92-4)
	SPREAD	The coffee house idea and use of coffee spreads quickly throughout Britain, satisfying an important public need in the day-to-day business and social life of the community. Occasionally women run coffee houses but they do not frequent them. (1:52)
	EARLY ANTAGONISM FROM BREWERS	Brewers demand the new trade be taxed and Pascal Rosea pays an annual report tax of one thousand sixpence (3:93).
1657		First public sale of coffee is advertised in a London newspaper (1:52).
1660	ALCOHOL USE	Restoration of the Crown and return of the Stuarts under Charles II. Period of increasing alcohol consumption (see persp. 14).
	DUTY ENACTED	Law is passed imposing a duty of 4 pence on every gallon of coffee made and sold (1:55).
1663	LICENSING AND SURVEILLANCE	All coffee houses are required to be licensed, with violations punished by fine. Coffee houses are placed under close surveillance by government officials. (1:55; 2:17)
1664-65	PLAGUE	During the plague, coffee house use survives despite the lord mayor's warnings against the dangers of gatherings; coffee is praised for warding off the contagion (5:14).
1665+	COFFEE PRAISED	With the restoration of the crown and the return of Charles II (1660) a pamphleteer proclaims that "Coffee and Commonwealth came in together for a reformation, to make us a free and sober nation" (1:55).
	POLITICAL ACTIVISM	Moral and political debates occur at the coffee houses, which become associated with political activism. The Coffee Club, or Rota, as Samuel Pepys calls it, is established in 1659 and flourishes as a debating society for the dissemination of republican opinions and a forum for political discusions. In 1677, it is written: "None dare venture into coffee houses unless he be able to argue the question whether Parliament were dissolved or not." The Rota is also effective for literary criticism. (1:55-6)
c.1665-75	RISING OPPOSITION	Tracts and satirical broadsides launch attacks on coffee as a drink; others defend it. The strongest opposition to the coffee house is political. In 1666, the government plans to strike against coffee houses, and in 1672, Charles II suggests suppression. His judges oppose the plan, pointing out that government derives considerable revenue from coffee, that the

CHRONOLOGY (Cont'd)

		coffee houses permit the free speech that assisted in Charles' restoration, and that the command would be disobeyed (1:68).
1670-82	POLITICS	Court and country factions develop into "Whig" and "Tory" parties.
1674	OPPOSITION BY WOMEN	"The Women's Petition Against Coffee" complains it makes men unfruitful, disorders domesticity, and interferes with business. This is repudiated in a pamphlet reply by a group of men. (1:66-7; 3:94-5)
1675	COFFEE HOUSES SUPPRESSED	Charles II issues a proclamation for the suppression of all coffee houses in London "as places where the disaffected meet and spread scandalous reports concerning the conduct of His Majesty and His Ministers." (2:18; 1:68).
	PROCLAMATION RECALLED	The immediate public uproar and discontent is so intense that, within a month, the proclamation is recalled and heavy taxes are imposed instead.
1676	ROLE OF COFFEE HOUSES IN SPREADING NEWS	At this time, coffee houses are active as a medium for the exchange and distribution of domestic and foreign news. Secretaries of State, who have the monopoly of news, decide to prosecute those who infringe upon it; they arrest coffee house keepers for publishing and dispersing false news (2:18).
1679	SUSPICION CONTINUES; HOUSES PROSPER	Coffee houses are again under suspicion as centers of intrigue and treasonable talk. Coffeemen are summoned before the Council for writing seditious news (2:18). But for the rest of the 17th century, coffee houses grow and prosper; as schools of conversation, they are referred to as "Penny Universities," since entrance fee is only a penny (1:69).
1680-2	COFFEE HOUSE IN POSTAL SYSTEM	The Penny Post is established , first privately and then by the government; coffee houses are used for the collection and delivery of letters.
1683+	SUSPICION CONTINUES	The discovery of the Rye House Plot again focuses attention on coffee houses. The lord mayor forbids coffee houses to distribute seditious newsletters.
1688	"GLORIOUS REVOLUTION"	The "Glorious Revolution." The Protestant William of Orange, King James II's son-in-law, invades England and James is dethroned.
		The Lord Chancellor commands the JP's of Middlesex to suppress all coffee houses that deal in newsletters or expose the public to foreign or domestic newspapers (2:19-20).
1689-1702	GIN EPIDEMIC	The reign of William and Mary inaugurates the gin epidemic.
1690+	ROLE IN BUSINESS	Coffee houses are used to assist in the daily life of the city; banking, shipping, insurance, stock exchange, commerce and trade are all conducted there. The business day mostly begins and ends in coffee houses, and to attract and retain customers, coffeemen keep wide variety of newspapers, bulletins, price lists, auction notices, etc. This increases in the 18th century. Various trades and interests congregate at particular houses, paving the way to the establishment of the future exchanges. (2:20-21)

CHRONOLOGY (Cont'd)

c.1700	EFFECTS ON ALCOHOL USE	In the last years of the 17th century, coffee begins to have a perceptible influence in diminishing drunkenness among the upper classes (8:477; 9:678, 680; see also persp. 14).
c.1715-50	USE THRIVES	By 1715 there are over 2,000 coffee houses in London; between 1680-1730 Londoners consume more coffee than any other city in the world (1:69; 3:89). The vogue of coffee houses reaches its zenith in mid-century. Almost every phase of public interest and activity finds its expression and outlet in coffee houses.
c. 1750	UPPER CLASS USE	Started as a forum for the commoner, coffee houses in the 18th century become a club for the leisure class, centers for the intellectual and literary life of the town. Coffee houses are used for lectures and educational purposes, bringing experiments and inventions to public notice (1:76; 2:24).
1750-1800	DECLINE OF COFFEE; RISE OF TEA	Coffee house clientele join "clubs" and gradually move to their own houses. By the end of the 18th century there are as many clubs as there were coffee houses at the beginning of the century. Home consumption of coffee is also now established. The British East India Company, more interested in tea, increases tea imports, so that with the decline of coffee houses tea becomes the national drink. As tea gains in popularity, coffee houses begin to serve wine, ale, and other liquors, in what seems to be a first step towards their decay (1:77). Nevertheless, outside London, coffee houses continue to be prominent meeting places for newly formed debating societies which reflect the development of a new popular political articulacy (7).

COMMENTARIES

Fantastic coffee claims -- Ukers, All About Coffee (1935), p. 54.

> "One can not fail to note in connection with the introduction of coffee into England that the beverage suffered most from the indiscretions of its friends. On the one hand, the quacks of the medical profession sought to claim it for their own; and, on the other, more or less ignorant laymen attributed to the drink such virtues as its real champions among the physicians never dreamed of. It was the favorite pastime of its friends to exaggerate coffee's merits; and of its enemies, to vilify its users. All this furnished good 'copy' for and against the coffee house, which became the central figure in each new controversy.
>
> "From the early English author who damned it by calling it "more wholesome than toothsome," to Pasqua Rosée and his contemporaries, who urged its more fantastic claims, it was forced to make its way through a veritable morass of misunderstanding and intolerance. No harmless drink in history has suffered more at hands of friend and foe.
>
> "Did its friends hail it as a panacea, its enemies retorted that it was a slow poison. In France and in England there were those who contended that it produced melancholy, and those who argued it was a cure for the same. Dr. Thomas Willis (1621-1673), a distinguished Oxford physician whom Antoine Portal (1742-1832) called 'one of the greatest geniuses that ever lived,' said he would sometimes send his patients to the coffee house rather than to the apothecary's shop. An old broadside...stressed the notion that if you 'do but this Rare ARABIAN cordial use, and then may'st all the Doctors Slops Refuse.'
>
> "As a cure for drunkenness its 'magic' power was acclaimed by its friends, and grudgingly admitted by its foes....Coffee was praised by one writer as a deodorizer. Another, Richard Bradley, in his treatise concerning its use with regard to the plague, said if its qualities

COMMENTARIES (Cont'd)

had been fully known in 1665, 'Dr. Hodges and other learned men of that time would have recommended it.' As a matter of fact, in Gideon Harvey's Advice against the Plague, published in 1665, we find, 'coffee is commended against the contagion.

Coffee vs. beer -- Ukers, All About Coffee (1935), p. 61.

> "It is easy to see why the coffee houses at once found favor among men of intelligence in all classes. Until they came, the average Englishman had only the tavern as a place of common resort. But here was a public house offering a non-intoxicating beverage, and its appeal was instant and universal. As a meeting place for the exchange of ideas it soon attained wide popularity. But not without opposition. The publicans and ale-house keepers, seeing business slipping away from them, made strenuous propaganda against this new social center; and not a few attacks were launched against the coffee drink."

The development of the coffee house -- Lillywhite, London Coffee Houses, p. 26.

> "In retrospect, [by the 1830's] it can be clearly seen that the coffee houses themselves (as with inns and taverns) had slowly passed through stages of transition. The early antagonism of the vintners had been replaced by acquisitiveness and by the early years of the nineteenth century, the coffee houses were mostly in the hands of vintners and coffee drinking but a minor attraction. Although many maintained the description of coffee-house, their character varied with the ebb and flow of custom, the mode of the time, or perhaps the licensing laws. Changes noted are from inn to tavern, tavern and coffee-house, thence to coffee-house, to coffee-house tavern and hotel, and lastly to hotel. Others changed from coffee-house to subscription-house, paving the way for clubs. With the approaching end of the coffee-house vogue, some reverted to tavern, winehouse or similar."

Coffee's role in English history -- Ukers, All About Coffee (1935), pp. 49, 69-70.

> "'The history of coffee houses, says Disraeli, 'ere the invention of clubs, was that of the manners, the morals and the politics of a people.' And so the history of the London coffee houses of the seventeenth and eighteenth centuries is indeed the history of the manners and customs of the English people of that period..." (p. 49).
>
> "In that critical time in English history, when the people, tired of the misgovernment of the later Stuarts, were most in need of a forum where questions of great moment could be discussed, the coffee house became a sanctuary. Here matters of supreme political import were threshed out and decided for the good of Englishmen for all time. And because many of these questions were so well thought out then, there was no need to fight them out later. England's great struggle for political liberty was really fought and won in the coffee house" (pp. 69-70).

Coffee's role in English history -- Wellman, Coffee (1966), pp. 22-23.

> "There has been some argument as to the earliest record of a London coffee house. It appears that liquid coffee was served as early as 1651 in a London 'cophe house' known as the Sultan's Head. It was said by Bradley (1716) that a Mr. Daniel Edwards, who was a Turkey merchant, and his servant, Pasqua Rosee, made coffee, the first time it was drunk in London, in 1657 in his house in St. Michael's Alley, Cornhill. In any case, the drink was soon much favoured, and a big business of import was built up around it to serve the coffee houses, many of which had reasons for fame. For example, in 1688, a Mr. Edward Lloyd started a coffee house in the Royal Exchange building, where he kept track of shop movements and numerous other mercantile matters for his customers. The house became known both for good coffee and dependability of information, and grew into what is now the greatest insurance institution in the world, operating practically everywhere, the present-day Lloyds of London.
>
> "Coffee houses of England became the centres for a certain intelligensia and social set. There was so much argumentation and discussion in the houses that spies returned to King Charles with black stories of the seditious nature of those places. He was advised, and

COMMENTARIES (Cont'd)

attempted to have them closed. One year there was a royal order to that effect, but within 11 days it was withdrawn because lawyers pointed out that it curbed the basic rights of man. The King then countered with a heavy tax on the drink sold publicly, which resulted in a situation like some other similar governmental prohibitions, tremendous ingenuity being expended to reduce the tax burden and still allow coffee for the houses.

"Such deterrents did not stop the popularity of coffee from increasing, or the establishment of larger numbers of coffee houses. During this period there were some 3,000 of them in London, and, of course, very many in other large cities of England. It was during the seventeenth and eighteenth centuries that coffee houses attained their height of sophistication and popularity in England. Names of some of the important ones during this golden period were Man's, Rota, The Grecian, Old Man's, Lion's Head, The Cocoa-Tree, The Folly, Turk's Head, Will's, Child's, and St. James. A very well known name was Tom's, and another was The Rainbow, but probably the most famous of all was The Cheshire Cheese.

"These housed the loitering and fierce geniuses of the time, who made of them their sounding boards of chit-chat, philosophy, elegant poetry and drama, art criticism, legal pronouncements, doggerel, political broadsides, stories of every colour, or finest thoughtful essays. Names of some of those old *habitués*, reached back into the lists of great users of the English language, such as Dryden, Pope, Pepys, Addison, Harris, Ben Johnson, Sir William Petty, Milton, Macaulay, Steele, Samuel Johnson, David Garrick, Boswell, Oliver Goldsmith, Gibbon, and Adam Smith. Those were great days. English art and literature were in flower, British ethics was being evolved, the Restoration was accomplished, the mature idea of the Commonwealth was coming into being, and the fitful meetings of Parliament were becoming more regular and fruitful. Who can possibly gauge how much influence the coffee house played in all this!"

Politics and London coffee houses -- Jacobs, Coffee (1935), pp. 95-96.

"These diatribes notwithstanding, the spread of the use of coffee was manifestly increasing the sobriety of the nation. Not until coffee came into conflict with Jupiter himself, with the political order, was a halt called. In the mythology of coffee, there is a perpetual recurrence of the similar; and just as viceroy Khair Bey, in Mecca, had persecuted coffee-drinkers because their beverage made them inclined to meddle in politics, so in London were coffee-houses miscalled for the same reason, being described as, in reality, political clubs. In a petition through the lines of which we seem to read that it must have been inspired by neglected wives, we are told: 'What a curse it is that ordinary workingmen should sit the whole day in coffee-houses simply to chatter about politics, while their unhappy children are wailing at home for lack of bread! Sometimes, too, an artisan's business goes to ruin because he has been flung into jail or pressed into the army!'

"These were not baseless calumnies. The coffee-houses were, in very truth, focuses of political conspiracy. Party politicians among the frequenters of coffee-houses ultimately elbowed out the unorganized and indifferent consumers of the beverage. The democrats, the whigs, patronized St. James' or the Smyrna Coffee-House. The tories, the members of the aristocracy--whom today no one would look for in a coffee-house--and their supporters likewise had their favourite haunts. Despite partisan differences, the parlimentarians were agreed with Pope, who wrote in The Rape of the Lock:

> Coffee, which makes the politician wise,
> And see thro' all things with his half-shut eyes."

Effect of coffee on drunkenness -- Coffee, Beer Street: Gin Lane, Q.J. Stud. Alc. (1966). p. 680.

"After 1751 the consumption of beer increased for a time owing to the decline of gin drinking but by 1830 the per capita consumption had decreased to half of what it was a hundred years previously--to about 18 gallons. Among the reasons for this decline in the consumption of all alcoholic beverages was the appearance of alternative beverages and places for eating and recreation--including the coffee shop. A journeyman tailor, writing in 1815, tells of his satisfaction at finding a coffee shop near his place of work: 'These places were but just then becoming general. They greatly pleased me, as I could now get suitable and timely refreshment in the morning and that too in a warm and otherwise

COMMENTARIES (Cont'd)

comfortable room with the very pleasant accompaniment of a daily newspaper.' Prior to his finding the coffee house he had breakfasted on a pot of porter and a penny roll at a public house. At the coffee house he found 'the additional accommodation of magazines and reviews for reading which the proprietor made an extra charge of sixpence per month....These however I read in the evening, while I took my coffee supper, for I learned to drink coffee at that meal as well as at breakfast time.'''

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13

Coffee
Prussia and France
1670-1787

BACKGROUND

Coffee drinking and the coffee house spread to France and then to Germany at the turn of the 17th century; and in both countries attempts to establish coffee monopolies engendered considerable political controversy. This perspective principally focuses on 18th century Prussia and the coffee policy of King Frederick the Great. In the 15th, 16th and 17th centuries, excessive beer drinking was rampant throughout Germany and beer was one of its main sources for crown wealth. Although Frederick the Great initially cultivated coffee drinking within the court circle, he soon realized that the spread of this new, imported substance produced a corresponding decrease in beer drinking. Even more than in England, the arrival of coffee in Prussia was greeted with protests by those with vested economic interests in beer. Frederick thus attempted to limit mass consumption of coffee and at the same time keep prices high in order to gain revenue for the state. He also followed the example of the French government, which he admired greatly, and established a coffee monopoly to farm out. In both countries, the monopoly systems not only failed to engender the needed revenues but, as in the case of tobacco, ultimately succeeded only in engendering hostility. Despite his concerns over the spread of coffee use, Frederick never felt that either he or his court needed to restrict their own use.

CHRONOLOGY

c. 1670	INTRODUCTION; MEDICAL USE	In 1675, limited coffee use appears at the court of Frederick William, the Elector of Brandenburg, where it was most likely introduced by his Dutch physician, Cornelius Bentekuh, who believed consumption of tea, coffee, and chocolate prolonged life by accelerating the circulation (1:41; 2:62).
1679-80	SPREAD	An English merchant opens the first coffee house in Hamburg, probably to fill the demands of English merchants and seamen.
1689-1713	PARIS	In Germany, coffee houses open in Regensburg, Leipzig, Nuremburg, Stuttgart, Augsburg and other cities (1:41). In Paris, the Café de Procope is opened, catering to the elite and intelligentsia and becoming the gathering place of actors, authors, dramatists, musicians, and, later, revolutionaries (3:17).
1692	FIRST FRENCH MONOPOLY; USE DECLINES	Louis XIV grants the first coffee monopoly in order to assure a fixed revenue to help pay for his war expenses. The concession has little value because the price of coffee is set very high by a simultaneous edict which lowers consumption. The monopoly requests that the price be lowered, but the excessive price has already ruined the monopoly (2:128).
1693	MONOPOLY REVOKED	The monopoly in ruins, it is revoked by Louis and the free trade of coffee is allowed, although the import duty is increased.
1700	USE INCREASES	Consumption rises and Louis regrets the loss of revenue from the monopoly.
1715-17	CULTIVATION	Coffee cultivation is begun by the French Company of the Indies (1:5).
1721	COFFEE IN BERLIN	King Frederick William I of Prussia grants a foreigner the privilege of conducting a coffee house in Berlin free of all rental charges. It is known as the English coffee house.

CHRONOLOGY (Cont'd)

c. 1725	SECOND FRENCH MONOPOLY	Louis XV, with national financial conditions still disastrous, cedes the tobacco monopoly to the French West India Company. As the company still needs assistance, he grants a coffee monopoly even more comprehensive than the first. The coffee price is fixed, smuggling is punished and the company is given unlimited powers of espionage.
c. 1727	MONOPOLY REVOKED	The price of supervising the trade exceeds the profits; in a few years the monopoly is given up and coffee trade is free again (2:129).
1729	SPREAD IN PRUSSIA	Coffee use spreads from its beginnings in the Prussian courts to the higher circles of the bourgeoisie (2:149).
1732		J.S. Bach composes the Coffee Cantata, inspired by the disturbances in France caused by the coffee monopoly of 1725 and by the annoyance of German women at coffee restrictions.
1740		During the reign of Frederick II, the Great (1740-1786), there are at least a dozen coffee houses in Berlin, and Frederick Meisner publishes the first comprehensive treatise on coffee, tea, and chocolate (1:41-42).
c. 1750		Coffee begins to supplant flour soup and warm beer as the traditional German breakfast.
1763	ECONOMIC CONCERNS	Following the Seven Years War, Frederick turns to reconstructing the financial disorder of Prussia. As a mercantilist, he seeks to establish a favorable trade balance of higher exports than imports. Both tobacco and coffee, which Frederick uses, are major imports which disturb his plans.
1770's	USE RESTRICTIONS	Frederick discovers that over 700,000 thalers are paid annually to foreign coffee merchants, and that as coffee drinking increases, there has been a corresponding decrease in the brewing trade. He tries to restrict its use by making it a luxury drink for people of "quality" and imposes a tax of eight silver groshchen per pound. Coffee drinking becomes a court ritual (1:42; 2:160).
1777	COFFEE MANIFESTO	Frederick issues a coffee and beer manifesto that states the people, and especially soldiers, must drink beer for its nourishing qualities: "It is disgusting to notice the increase in the quantity of coffee used by my subjects, and the amount of money that goes out of the country as a consequence. Everybody is using coffee. If possible, this must be prevented. My people must drink beer. His Majesty was brought up on beer, and so were his ancestors, and his officers. Many battles have been fought and won by soldiers nourished on beer; and the King does not believe that coffee-drinking soldiers can be depended upon to endure hardship or to beat his enemies in case of the occurrence of another war" (1:42).
	USE DECREASES; SMUGGLING	For a while beer use increases and coffee remains a luxury afforded only by the rich. Then coffee smuggling increases and continues despite all attempts to stop it.

CHRONOLOGY (Cont'd)

1781	PRUSSIAN MONOPOLY	Following the French precedent, Frederick creates a royal coffee monopoly and forbids coffee roasting except in royal roasting establishments. This is hoped to act as an expedient to stop smuggling, since spies would be able to "smell out" where smuggled coffee is being roasted. These "coffee smellers" become greatly disliked and the whole monopoly is resented because it is administered by Frenchmen (1:42; 2:160).
	MONOPOLY EXEMPTIONS	Frederick makes exceptions in the cases of nobility, clergy and government officials, to whom he issues special licenses permitting them to do their own roasting. This, in effect, confines the use of coffee to the upper class. They purchase their supplies from the government, and since the price is greatly increased, Frederick at first derives substantial revenues (1:42).
1781-84	TRADE/SALES DECLINE	General trade begins to fall off, and the import duty, increased to one thaler per pound, leads to a reduction in sales. Even though the duty is then reduced by a half, the ordinary people turn instead to coffee substitutes such as barley, corn, wheat, dried figs, and chicory (2:161).
1784	MONOPOLY ATTACKED	The State Monopoly is attacked for mismanagement, harassment of merchants, reducing trade, interference with transport, and increasing costs of administration.
1787	MONOPOLY REVOKED	In order "to remove all desire and inclination for fraud," Frederick's successor, Frederick William II, issues an edict that reduces the tax on coffee and ends the restrictions on roasting (2:162).

COMMENTARY

Coffee vs. beer in Germany -- Uribe, Brown Gold (1954), pp. 18-20.

> "Coffee had little trouble attaining supremacy over the wines and ciders of France, England and Italy. But in central and northern Germany it came into conflict with a beverage whose social and economic power was enormously greater than that of the wine industry....
>
> "Beer and other alcoholic drinks were consumed by northern Europeans not only to satisfy thirst but to create more thirst. Men, women, children, the aged and infirm, the young and tender--everyone drank one or another form of spirits. Drunkenness was general, popular and acceptable. Against such formidable opposition, coffee was almost powerless.
>
> "The nobility, the only class wealthy enough to afford coffee, were the worst offenders. They seemed to find but two justifications for living: war and drunkenness. A slim German noble was a rarity. Men were happily, hugely potbellied. Fatness was synonymous with health, power, dignity and genius.
>
> "Frederick William of Brandenburg, who ruled Berlin and the surrounding area, was one of a few temperate German monarchs. He abhorred the drunkenness of his nobles and encouraged a Dutch physician to introduce coffee to the court some time in the 1670's....
>
> "It was not until the beginning of the eighteenth century that the English merchants made headway against the resistance of the beer barons. In small quantities, coffee began to flow into the German cities, but it met stiff opposition from every level of German society. The doctors argued that women who drank coffee could not bear children. Johann Sebastian Bach made fun of their attitude and composed the Coffee Cantata to dramatize the annoyance of German women against the restrictions surrounding the use of coffee.

COMMENTARY (Cont'd)

> "As late as 1777, Federick the Great issued a manifesto against coffee, hailing the virtues of beer and lamenting the flow of money to foreign merchants for supplies of green coffee. But coffee outlived its opponents and soon supplanted the flour soup, onion sandwiches and warm beer served at German breakfast tables.
>
> "The coffee house never attained widespread popularity in German cities. The beer parlor and corner saloon were more to the German male's liking and beer continued to be his favorite beverage. But his womenfolk had other ideas. When they finished their daily battle with the housework, the women gathered over coffee and discussed the gossip of the day.
>
> "The epithet Kaffeeklatsch, now popular in many languages to describe a social gathering, was coined by beer-drinking German men to deride coffee as a 'woman's drink.'"

Frederick the Great's policy -- Jacob, Coffee (1935), p. 159.

> "Even Frederick had no scruples about establishing a state monopoly in coffee and tobacco. He regarded them as luxuries that could bear high taxation, since in any case the poor among his subjects could not afford to buy them. That was the way in which he justified a policy that was ill-conceived and unsuccessful. Following the French precedent, the monarch farmed out both these monopolies. He was influenced, no doubt, by his usual tendency to overvalue all that was French. Just as in youth he had believed that only in Paris good plays could be seen and good poetry written, so, in his old age, he swore by French political economy."

Coffee and the French Revolution -- Jacob, Coffee (1935), p. 144.

> " 'Coffee is the revolution.'
>
> "Michelet, the historian, did not write the foregoing words; but he came very near to doing so when he made coffee responsible for that explosion étincelante, for that fulminating explosion of the intellectual life of the eighteenth century, when l'espirit jaillit, spontané, comme il peut. '...for at length the tavern has been dethroned, the detestable tavern where, half a century ago, our young folks rioted among wine-tubs and harlots. Fewer drunken songs o'night-time, fewer nobles lying in the gutter.... Coffee, the sobering beverage, a mighty nutriment of the brain, unlike spiritous liquors, increases purity and clarity; coffee, which clears the imagination of fogs and heavy vapours; which illumines the reality of things with the white light of truth; anti-erotic coffee, which at length substitutes stimulation of the mind for stimulation of the sexual faculties'....The strong coffee of San Domingo, which Buffon, Diderot, and Rousseau drank, redoubled the ardour of their ardent souls--and the prophets who assembled day after day in the Café Procope saw, with penetrating glance, in the depths of their black drink the illumination of the year of the revolution."

REFERENCES

(1) Ukers, All About Coffee (1935), pp. 27-30, 41-43.
(2) Jacob, Coffee (1935), pp. 122-162.
(3) Uribe, Brown Gold (1954), pp. 17-20.

14

Alcohol (Gin)
England
1650-1750

BACKGROUND

Excessive drinking was a major characteristic of Renaissance England. In the reign of Henry VIII (1509-1547), distilled spirits first acquired a reputation; in 1552, drunkenness is mentioned as a crime for the first time. The writings of the Elizabethan Thomas Nash (13) are filled with references to inebriety and, from that time on, a number of preventative statutes were passed attempting to license taverns, restrain excess use, or limit production. All the writers of the age confirm that drunkenness was widespread during the reign of James I (1603-1625), and that James had as much trouble and as little success in controlling drunkenness as he did in controlling tobacco use (see persp. 1). By 1606, the situation had so deteriorated that Parliament passed an "Act to Repress the Odious and Loathsome Sin of Drunkenness." This act, which remained in effect until 1872, is a landmark in the history of liquor control in England; it is one of the first attempts to legislate moderation. It reflects Parliament's view that there was a point in drinking beyond which it becomes illegal.

If the drunkard could no longer escape with a simple admonition (5:143-6), beer drinking itself was still considered one of the distinguishing virtues of the English (2:678-80). Throughout the 17th and 18th centuries, alcohol consumption was "connected with every phase of life from apprenticeship (indeed from birth and baptism) to death and burial" and drunkenness among all classes was a prodigious problem (16:303; 16:15). The real alcohol crisis in England began in the mid-17th century with the introduction and rapid spread of gin drinking among the poor. Distilled spirits go back in Europe only to the 11th and 12th centuries, with the discovery of the process itself being attributed to either of two Arabs, the alchemist Gerber (c. 800) or the physician Rhazes (c. 900). The discovery of distillation marks the major turning point in the history of alcohol use; it made possible the production of beverages containing several times the alcoholic content of the strongest wines, providing a new convenient and concentrated source of inebriety. Still throughout the Middle Ages distilled liquors were principally made from wine (such as brandy) and were not used as recreational beverages but as medicines. Credited with extraordinary healing powers, the common name for spirits was aqua vitae or "water of life." Indeed, to Arnold of Villanova (c. 1300) they were the philosopher's stone, the key to everlasting life. As prices were high, consumption was also mainly limited to the wealthy.

In mid-17th century Holland, however, a new spirit liquor was distilled from grain which was called junever, Dutch for "juniper," the berry which was used to flavor the raw spirit. Able to be produced plentifully and cheaply, its use as a beverage spread throughout Europe. In England, where it became known as geneva and finally as gin, an epidemic of use among the poor broke out which became one of the major social issues of the day. Again, the period's alcohol problem was not simply limited to gin; the middle and upper classes continued to consume large amounts of beer and wine. But gin clearly was the greatest problem, particularly between 1720 and 1750. Among the poor, whose numbers were increasing rapidly during this period, gin drinking became a prominent escape from the horrible dreariness, hardship, and insecurity of their daily lives. This situation was further aggravated by the government's policies, which encouraged distillation and sales in order to support the landed interests and provide revenues. The effect of this policy was critical. As Coffey (1966) emphasizes, "the rise and decline of gin drinking can be related directly to taxation and legislation" (2:673).

The gin epidemic illustrates the disastrous consequences which can occur when a potent spirit is made readily available for the first time in a society suffering from social dislocation and loss of its old stability (1:63). The history of gin in 18th century England is of further interest because the social response to the epidemic was, in many respects, "the prototype of future drug scares" (1:64). As drunkenness was increasing, so was crime, and soon the London middle classes were in panic. It was finally the middle-class and upper-class fears of the drunken London mob which forced the government to establish more controls over production and sales.

CHRONOLOGY

c. 1650	INTRODUCTION	Dutch physician invents gin by distilling alcohol in the presence of juniper berries, creating the first distilled liquor to be consumed on a substantial scale. Gin is introduced into England by British soldiers upon their return from fighting in the Low Countries, where they drink it to give themselves "Dutch courage" (1:62; 7:673).
1660		Drinking increases after the collapse of the Puritan Commonwealth and the restoration of the Stuarts with King Charles II, but as the Stuart economic policy favors the importation of French brandy and wine, gin makes little headway.
1688-90	DISTILLATION LAWS LIBERALIZED	The "Glorious Revolution" dethrones King James II and the Protestants William of Orange and Mary (James' daughter) begin their reign (1689-1702). William, a frequent drinker himself, early learns of the revenue value of the drink and encourages the distillation and sale of gin. Almost immediately, he prohibits the importation of French wine and spirits, and then breaks the London Distillers Guild Monopoly. In 1690, the "Act for the Encouraging of the Distillation of Brandy and Spirits from Corn" grants permission to anyone to distill and retail spirits made from English corn on payment of a duty. This reverses the previous government policy which, from Norman times (mid-11th century), had prohibited the conversion of malt into spirits, except for medicinal purposes. Duties are raised on beer; Commons introduces a malt tax; and duties are imposed on mum, sweets, cider and perry (3:246; 2:673-4; 1:62).
1688-94	PRODUCTION INCREASES	The distillery business thrives. Due to the 1690 act, in 1694 the annual production of distilled liquors, mostly gin, rises to nearly a million gallons (9:27). In addition to distilled spirits, in 1688 over 12½ million barrels of ale and beer are produced--2½ barrels for every man, woman and child ~~in England (10:30-1)~~.
c. 1700	COFFEE: UPPER CLASS USE	In the last years of the 17th century, the spread of coffee perceptibly diminishes drunkenness among the upper classes. Although hard drinking among the upper classes is still extensive, it will never again be as general as in the time of Elizabeth and the Revolution (14:477).
1701	SALES ENCOURAGED	Anyone can retail spirits even without the licenses required of ale-house keepers (2:674).
1702-27	SPIRITS PRAISED	Daniel Defoe, in his Review, refers to the "honest drunken fellow" as a character of man's praise and lauds the distilling industry for paying rents and employing people. As one of the most essential supports of the landed interests, he concludes, it should be preserved and treated with care (1:63).
	SALES ENCOURAGED; PRODUCTION RISES	The reign of Queen Anne (1702-1714) gives home distillation a boost by raising import duties and lowering home excise. In the reign of King George I (1714-1727), distillers continue to be encouraged by legislatures; production rises to 2 million gallons, double that of 1694 (9:28; 2:672).

CHRONOLOGY (Cont'd)

1720-9	SALES ENCOURAGED; PRICES DECLINE; USE RISES	The Mutiny Act gives distillers and retailers added inducements (2:674). Distilleries multiply and drink becomes so cheap that unrestrained indulgence prevails (it is sold cheaper than beer).
	SOCIAL INFLUENCES; USE AMONG POOR	A large urban poor population develops as a result of massive socioeconomic changes in England. Gin drinking becomes extremely popular with the masses and provides an escape from the degradation and poverty of London life. In the 1720s the death rate in London is one in twenty, much of it attributed to alcohol-related diseases (1:69; 2:674; 11:33-4).
1726	CONCERN GROWS	The London magistrates become alarmed. A committee reports that gin is sold in one house in ten in some London parishes. Although Parliament is not yet concerned about the plight of the poor, they are disturbed that use is spreading to soldiers and servants (1:63). Defoe writes his defense of gin: A Brief Case of the Distillers and the Distilling Trade in England (2:673).
1727	USE RISES	Gin consumption rises to 3,601,000 gallons (2:672).
1729	1ST GIN ACT	Parliament attempts to control drunkenness by the first Gin Act, which requires retailers to pay an excise tax of 20 pounds a year for a license and puts a duty on gin of 5 shillings per gallon (7:24-5).
	MASS PROTESTS	The Gin Act suppresses the making of good gin; poisonous "Parliament Brandy" begins to be produced. Massive protests result. Farmers and landed interests who produce the grain for distillation also protest (2:674; 1:64).
1730-49	CRIME SPREADS	A mounting crime wave among London's poor terrifies the city; much of the poverty and criminality is blamed on gin.
1733	LAWS LIBERALIZED	Parliament decides "to consider further methods for encouraging the making and exporting of home-made spirits" and repeals the 1729 act as it discourages distilling. A new act imposes penalties on retail sales except when sold in dwelling places (6:33; 3:271-86).
	USE RISES	A "perfect pandemonium" of drunkenness results. Gin is given as wages, sold on every market stall, vended by peddlers. It appears that "one half of the town" is set up "to furnish poison to the other half" (7:22). Intemperance spreads as every householder is converted into a publican; production of distilled liquor rises to 11 million gallons, compared to 2 million in 1714 (9:28).
1736	GIN ATTACKED; PROHIBITION URGED	The report on the degeneration of the London poor places the blame on gin and the first Parliamentary debate on prohibition occurs. A heavy duty of 20 shillings per gallon on retail spirits is proposed, since the low price of spirits is said to be the principal inducement to excessive use. The opponents of prohibition argue that this is unfair as the rich, who can purchase it wholesale, can still indulge, and that it will not work because spirits will inevitably find illegal entry channels. The prohibitionists counter that retail prohibition will at least keep the spirits out of the reach of persons of inferior rank who are those most likely to abuse them (1:65).

CHRONOLOGY (Cont'd)

	2ND GIN ACT; HEAVY DUTY IMPOSED	Bowing to public demand, the government reluctantly passes a new Gin Act which imposes an enormous duty and prohibits the sale of less than 2 gallons without payment of a license fee of 50 pounds a year. The act is enacted with the avowed objective of making spirits "come so dear to the consumer that the poor will not be able to launch out into an excessive use of them" (12:15; 7:25-6; 3:286-8).
1736	GIN RIOTS	The London mob protests and violent "Gin Riots" ensue (8:53-63). The mob greets the queen with shouts of "Gin or King!" Even with numerous paid informers, the new law is impossible to enforce. Within a few years it becomes evident that Parliament has failed to suppress excessive drinking and that consumption is increasing. Respectable traffickers abandon the business and it falls into the hands of the reckless and disreputable. Not only does the clandestine sale of spirits increase, but so does the popularity of beer (3:289-92; 7:28; 2:675).
1737	USE DECREASES	Increase in duty lowers gin consumption from 5,394,000 gallons in 1735 to 3,600,000 gallons (2:673).
1738	ENFORCEMENT URGED	A proclamation is passed to enforce the Gin Act and protect the efforts of officers of justice.
1742	USE INCREASES	Production of spirits peaks at 20 million gallons; gin consumption rises to 7,160,000 gallons (2:673; 9:28).
1743	GIN ACT REPEALED; LAW LIBERALIZED (TIPPLING ACT)	Parliament, needing more revenue, repeals the 1736 act and adopts a more moderate policy that combines revenue duties with the licensing of retailers at a moderate annual fee. The law, known as the Tippling Act, aims to suppress smuggling and the gin shops as such, to make the sale public--and as far as possible respectable--and to increase the price of spirits (6:36). It grants licenses only to alehouse license holders, and forbids distillers to retail (1:67). In Parliament, Lord Bathurst argues that it is impossible to prevent the retailing of spirits and that it is better to license it instead, as licensing will provide money for the European wars and reduce usage by increasing expense.
1747	FURTHER LIBERALIZATION: USE INCREASES	While consumption may have been reduced at first (6:36), distillers petition for the right to sell and the act is modified. This right being restored, a great increase in consumption and public drunkenness ensues. The population begins to decline, due in part to gin-related deaths.
1748	METHODISM	John Wesley and the Methodists begin preaching to poor urban and industrial workers encouraging sobriety, thrift, and hard work (2:678).
1749	CRIME INCREASES	The London crime wave climaxes with the storming of Gatehouse Gaol by the mob.
c. 1750	RAMPANT CONCERN; HOGARTH, FIELDING	Gin consumption rises to 11 million gallons (2:673). In a period of rising prosperity and comfort among London's middle class, public conscience becomes aroused and there are renewed

CHRONOLOGY (Cont'd)

		protests against debauchery. Hogarth's Beer Street and Gin Lane (1751) depict the horrors of life among the London poor featuring a gin shop with a sign quoting the common Cockney epigram "Drunk for a penny, dead drunk of twopence, clean straw for nothing" (2:689; 6). Fielding's An Inquiry into the Causes of the Late Increase of Robbers (1751) denounces the evils of gin, blaming these crimes on this "new kind of drunkenness unknown to our ancestors" (14:480). While the working and middle classes prosper, the poor, says Fielding, are "in want of every necessity of life" and display terrifying drunkenness and lawlessness (2:676). Gin is called "the grand destroyer" (1:69).
1751	1743 ACT RESTORED	A new act reimposes the original provisions of the 1743 act. It strengthens retail controls and aims to license the sale of liquor rather than restrict it.
1751+	USE DECLINES	These measures are more efficacious. Gradually the indiscriminate sale of liquor in London is put down, at the cost of steadily increasing licensed houses (7:38-39). Gin consumption declines from an annual 11 million to less than 2 million by 1758. Although beer drinking increases for a while, coffee and tea slowly begin to take the place of alcoholic beverages (2:669, 673, 678). Methodism also continues to influence sobriety among the poor. The act is said to be a turning point in the social history of London in that it considerably reduces public drunkenness. Nevertheless, the controversy over drunkenness continues into the 19th century.

COMMENTARY

Effects of government laxness -- Webb and Webb, Liquor Licensing in England (1903), pp. 20-22.

> "During the greater part of the seventeenth century the new art of the distillation of spirits had been a monopoly in the hands of the Distillers' Company and other royal patentees, and the trade had remained small. But after the Revolution, as part of the commercial warfare levied against the French, the importation of foreign brandy was prohibited or heavily taxed, and a general permission was granted in 1690 to all persons to distil and retail spirits made from English-grown corn. The habit of drinking ardent spirits now assumed alarming proportions. The Legislature, far from desiring to suppress this new drink traffic, at first gave it distinct encouragement. It became an object of the Government to develop the manufacture of English brandy and strong waters, seeing that, in this way, 'great quantities of the worst sort of malted corn, not useful to the brewers, hath been yearly consumed by those who set up works for that purpose.' Between 1690 and 1701 a series of statutes provided, for the encouragement of these patriotic distillers, that, if they used malted corn, they should pay only a low preferential duty on their product, whilst 'French and other foreign brandies' should be as far as possible excluded. No provision had been made by Parliament for requiring retailers of spirits to obtain a license, and 'punch houses' and 'dram shops,' as the new places were called, multiplied rapidly in London and Westminster....The result of this free sale of a powerfully intoxicating liquor, rendered specially cheap by the extremely low duty on its manufacture, was a perfect pandemonium of drunkenness, in which the greater part of the population of the metropolis seems to have participated. Not only were there in London and Westminster six or seven thousand regular dram-shops, but cheap gin was given by masters to their workpeople instead of wages, sold by the barbers and tobacconists, hawked about the streets on barrows by men and women, openly exposed for sale on every market stall, forced on the

COMMENTARIES (Cont'd)

maidservants and other purchasers at the chandler's shop, distributed by the watermen on the Thames, vended by pedlars in the suburban lanes, and freely offered in every house of ill-fame, until, as one contemporary writer puts in, 'one-half of the town seems set up to furnish poison to the other half.'"

Gin in 18th century London: An overview -- Coffey, Beer Street: Gin Lane, Q.J. Stud. Alc. (1966), pp. 690-691.

"In response to measures taken by the British government to encourage the production of spirits distilled from home-grown cereals, the consumption of gin in England rose from 527,000 gallons in 1685 to over 11,000,000 gallons in 1750. Much the greater part of this consumption was confined to the urban poor, particularly of London. During the early 18th century the middle and working classes prospered but the poor were underemployed, underfed and miserably housed. The London mob provided a terrifying display of drunkenness and lawlessness. Much of the poverty and criminality of the day was blamed on the enormous amounts of gin drunk by the poor. Despite the steady stream of immigrants into the city, between 1700 and 1750 the population of London (675,000 in 1750) declined; in the rest of the country the population increased steadily. Contemporary writers blamed the decline on the excesses of gin drinking. Gin given to infants was blamed for the appalling rates of infant mortality: between 1730 and 1749, 75% of all children christened were buried under the age of 5.

"In 1720 and 1736 the government attempted to regulate the retailing of gin but the measures were unpopular and largely ignored. In 1743 the government, needing more revenues, repealed the regulations and the consumption immediately increased. In 1750 a commission reported that in parts of London 1 house in 5 was a gin shop. In response to a stream of petitions, perhaps the most effective being a report by Henry Fielding and Hogarth's prints Beer Street and Gin Lane, the government in 1751 passed effective legislation that led to a decrease in gin consumption to under 2,000,000 gallons by 1758. The decline of gin drinking was accompanied by a general spirit of reform that changed the character of London. Drinking habits were also changing and tea and coffee were taking the place of alcoholic beverages."

Social influences on drunkenness -- Blum et al., Drugs and Society (1969), pp. 33-34.

"It was during this same period, 1700-1800, that England began undergoing massive socio-economic changes. Overseas discovery, colonization, and expanding international trade thrived, while the process of industrialization was effecting changes at home. The first invention revolutionizing the textile industry was the flying shuttle in 1733, a process which gave England the world's industrial leadership. A decline in the death rate increased the population by 50 per cent in one century. As a consequence of land enclosure and reduced farming, urbanization increased, bringing mercantile-industrial development and, of course, population expansion. Each of these developments contributed to the growth of the urban poor, a mass whose misery was not much reduced by employment in jobs with a thirteen-hour working day, low wages, residence in slum tenements, and slavery to the machine. Many others were without work, so that in this century the city saw for the first time chronic mass unemployment."

Gin: scapegoat -- Inglis, Forbidden Game (1975), pp. 69-70.

"Gin drinking had spread 'with the rapidity and the violence of an epidemic,' the historian Lecky was to write: 'small as is the place which this fact occupies in English history, it was probably, if we consider all the consequences that have flowed from it, the most momentous in the eighteenth century--incomparably more so than any event in the purely political or military annals of the country....'

"Yet those spiritous liquors were not really to blame for what had happened in England--any more than for what was to happen on Tahiti. It was the way that gin had been virtually thrust down Londoners' throats which had been responsible; coupled with the condition of London's poor at the time. Gin drinking was not merely, as Dorothy George described it in

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her London Life in the Eighteenth Century, 'essentially a disease of poverty'; it was a disease of the ugly kind of poverty portrayed by Fielding, Morris and many another writer. The picture that emerges is of a squalor and degradation far worse even than in the London of the Great Plague; and it was from this that the London poor were seeking escape.

"Even so, had spirits come gradually into use Londoners might have learned to come to terms with them, as the Dutch had. But not only were they a novelty in Britain; their sale was relentlessly pushed by the distillers (whose trade, Hervey complained, become the most profitable of any in the kingdom--'except that of being broker to a Prime Minister'). And the distillers themselves had been given every encouragement by the Government, hungry for more revenue--and by the landowner M.P.s, hoping for higher rents.

"It was the way gin was introduced, coupled with the environment, that made its effects destructive....The lesson the gin plague taught, in fact, was not so much that prohibition was futile, as that it was futile unless the Government enjoyed public confidence and support. Where it was known that the members of the ruling class--Walpole himself being notoriously one of them--did not feel that prohibition should apply to them, the law fell into contempt. Efforts to enforce it, therefore, tended simply to inflame the public; often even those citizens who were not spirit drinkers, and would have liked to see consumption stopped, but were more deeply concerned about the corruption that attempts to stop it involved."

Uncertainties of London life -- George, London Life in the Eighteenth Century (1964), pp. 269-272.

"The dominating impression of life in eighteenth century London, from the standpoint of the individual, is one of uncertainty and insecurity. It was a time when trade was expanding more rapidly than population, yet the Londoner was threatened with casualties of various kinds. During the hundred and twenty years between 1695 and 1815 England was at war for 63 years, at peace for 57, and she repeatedly underwent dislocating transitions from peace to war, and war to peace. On the whole (subjected to much occasional distress), trade boomed in time of war and peace brought a corresponding depression and much misery--the goals and debtors, prisons were soon filled to overflowing.

"[I]rregularity was the rule in many London trades. Almost all were seasonal....This irregularity gave rise to much distress and much of what was then called depravity.... It was a result of this state of things that earnings in London were often high, but nearly always uncertain, and this irregularity led to many other evils. The generally accepted point of view was that high wages were a direct cause of drunkinness and irregularity of work....High wages are rather to be regarded as a means than a cause of idleness and drunkenness, and even in 'the then state of society' they contributed to the general and increasing prosperity of trade which helps to explain the progressive diminution of social evils....

"'Luxury and extravagance,' manifested chiefly in excessive drinking and a passion for gambling, were common to all classes; there is no need to explain them by high wages; temptations to drink and gamble were interwoven with the fabric of society to an astonishing extent, and they did undoubtedly combine with the uncertainties of life and trade to produce that sense of instability, of liability to sudden ruin, which runs through so much eighteenth century literature."

Origins of the epidemic -- Lecky, England in the Eighteenth Century (1887), 1:478-479:

"Among the poor...in the beginning of the eighteenth century, the popular beverage was still beer or ale, the use of which--especially before the art of noxious adulteration was brought to its present perfection--has always been more common than the abuse. The consumption appears to have been amazing. It was computed in 1688 that no less than 12,400,000 barrels were brewed in England in a single year, though the entire population probably little exceeded 5,000,000. In 1695, with a somewhat heavier excise it sank to 11,350,000 barrels, but even then almost a third part of the arable land of the kingdom was devoted to barley. Under Charles I, a company was formed with the sole right of making spirits and vinegar in the cities of London and Westminster and within twenty-one miles

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of the same, but this measure had little fruit: the British distilleries up to the time of the Revolution were quite inconsiderable and the brandies which were imported in large quantities from France, were much too expensive to become popular. Partly, however, through hostility to France, and partly in order to encourage the home distilleries, the Government of the Revolution, in 1689, absolutely prohibited the importation of spirits from all foreign countries, and threw open the trade of distillery, on the payment of certain duties, to all its subjects. These measures laid the foundation of the great extension of the English manufacture of spirits, but it was not till about 1724 that the passion for gin-drinking appears to have infected the masses of the population, and it spread with the rapidity and the violence of an epidemic. Small as is the place which this fact occupies in English history, it was probably, if we consider all the consequences that have flowed from it, the most momentous in that of the eighteenth century--incomparably more so than any event in the purely political or military annals of the country. The fatal passion for drink was at once, and irrevocably, planted in the nation."

The Act of 1751 and the decline of drunkenness -- Coffey, Beer Street: Gin Lane, Q.J. Stud. Alc. (1966), pp. 677-678.

"The 1751 Act really did reduce the consumption of gin. In 1757 Burrington wrote, 'the lower people of late years have not drunk spiritous liquors so freely as they did before. ...We do not see the hundredth part of poor wretches drunk in the streets.' Yet the improvements were only relative; in 1801 Doctor William wrote, 'I am convinced that considerably more than one-eighth of all deaths that take place in persons above twenty years old, happen prematurely through excess in spirit drinking.'

"After 1750, the whole character of London began to change so that by 1802 John Feltham noted, 'Two of the things which fill the mind of the observer with delight are the slightness of the restraints of the police and the general good order that mutually illustrate each other....We venture to assert that no city in proportion to its trade and luxury is more free from danger to those who pass the streets at all hours.'...The control of gin drinking was not, of course, the sole reason for the change but was part of a general spirit of reform which demanded streets that were paved, lighted and policed, medical services for all through free hospitals, dispensaries and workhouse infirmaries, and which produced charitable associations devoted to the rescue of the poor and maimed. None of these improvements had been formerly possible because of the weakness of local government and the towns' and cities' pitiful representation in Parliament...

"One of the most potent influences on the changing manners of the poor was John Wesley. Starting in 1748, he and his fellow Methodists traveled throughout England establishing churches and preaching to vast open-air audiences of urban and industrial workers. These clases had been almost totally ignored by the established church....Although the Methodists did not teach abstinence (John Wesley approved of beer drinking), their insistence on sobriety, thrift and hard work did much to moderate the tastes of the lower classes.

"Coffee and tea were beginning to take the place of alcoholic beverages. By 1765, 90 families out of 100 were estimated to drink tea twice a day. This, in turn, caused considerable disquiet and was blamed for the moral deterioration of the poor: 'The vast consumption and injurious effects of tea seemed to threaten the lives of the common people equally with gin.' Fortunately, no social reformer with the skill and influence of Henry Fielding and William Hogarth appeared to battle tea."

The act of 1751 and decline of drunkenness -- George, London Life in the Eighteenth Century (1964), pp. 36-40.

"The Act of 1751 really did reduce the excesses of spirit-drinking. It was a turning-point in the social history of London and was so considered when this time was still within living memory. It accepted the principles of the Act of 1743 but enforced them more stringently. The duty on spirits was increased to make them less perniciously cheap. Distillers, chandlers and grocers were expressly forbidden to retail. The sale of spirits at the chandler's shop had been a fruitful source of evil. These shops abounded in London. They provided the poorest classes with their staple food of bread, small beer and cheese--this stable became bread and gin, it was even said gin only...

COMMENTARIES (Cont'd)

"The measures to check excessive spirit-drinking had been forced upon the Government in the teeth of vested interests by a general protest in which the middle and trading classes had taken a leading part. To appreciate what was implied by the widespread denunciation of gin-drinking one must remember that it was entirely untouched by the spirit of the temperance reformer. Drunkenness was hardly regarded as a vice, the consumption of strong beer was almost regarded as a British virtue. Indeed, Defoe wrote in 1702, 'an honest drunken fellow is a character in a man's praise....' It was considered as one of the evil consequences of gin-drinking that less malt-liquor was consumed...

"...Gin was said to be the drink of the more sedentary trades, weavers particularly, and of women. Labouring men and artisans doing heavy work drank strong beer. Gin-drinking was essentially a disease of poverty. Gin was so cheap, so warming and brought such forgetfulness of cold and misery. It was a passion among beggars and the inmates of workhouses and prisons....the typical gin-drinkers were the poorest and most wretched of the community, their poverty a cause as well as a result of their craving for gin, and when gin became dearer the reduction in consumption was immediate."

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15

Alcohol

Sweden

1800-1917

BACKGROUND

Traditionally, all Scandinavian countries have striven to eliminate the consumption of alcohol, or at least to bring about a drastic reduction of consumption (5:132). Mäkelä even argues that the term "alcohol policy" is probably of Scandinavian origin, for in most other countries conscious and centrally directed alcohol policy is not pursued in the same way (6:344). One of the earliest attempts at alcohol control was the Gothenburg system of nonprofit licensed companies which operated public houses in Sweden. In 1788 the Swedish crown's alcohol monopoly was ended and every farmer was permitted to manufacture and sell spirits. Alcohol became cheap and readily available; drunkenness became widespread. To remedy this situation, local temperance movements soon developed, and in 1865 an experimental licensing company was established in Gothenburg which became the model adopted by other cities. The Gothenburg system spread for fifty years by local initiative, without any national legislation, until it was made mandatory by the state in 1905. Although the system was abandoned in 1917, it established a focus in Sweden on monopoly regulatory systems rather than on prohibition.

CHRONOLOGY

1800-1850	UNRESTRICTED USE	Production and sale of alcohol is unrestricted; there is widespread use of potent, cheap potato spirits (bränvin), often distilled at home. In 1830, no less than 173,000 stills are in operation (3:14). It is estimated 40 liters per year per capita are consumed between 1830-40, a half gallon per week for every man, with a liberal supply left over for women and children (2:9; 1:347). From 1931 to 1840 no less than 35% of the conscripts are rejected as unfit for military service because of drunkenness (4:13).
1850-1853	CONCERN GROWS	Physicians report that alcohol abuse is a major social problem causing great misery, especially among the working class (2:10-11).
1850's	LOCAL REGULATION	Local communities begin initiatives to regulate liquor sale and consumption. Special companies, organized without private financial interest, are granted the exclusive rights for sale in a district (1:347-8; 2:11-13).
1855	NATIONAL REGULATION	Parliament (Riksdag) enacts first general measure regulating liquor traffic: the right to manufacture and sell spirits is made dependent on permission granted by local authorities (3:14). This policy forms the basis for all subsequent restrictive systems.
	EFFECT	Small distilleries disappear (1:347).
1865	GOTHENBURG FORMS CONTROL COMPANY	The city of Gothenburg organizes a Licensing Company to take over and exercise rights of operating public houses in the city; its aims are to eliminate private financial interests and to devote profits to public purposes. The number of public houses is cut down, "bar" business is prohibited from 6 p.m. on Saturday to 8 a.m. on Monday. The following year, convictions for drunkenness drop from 2,070 to 1,424 (3:31).

CHRONOLOGY (Cont'd)

1865-1875	DRUNKENNESS ARRESTS DECREASE	While apprehensions for drunkenness increase in Stockholm by 60 percent and in Christiana by 122 percent, they decrease in Gothenburg by 21 percent (3:23).
1866+	GOTHENBURG SYSTEM SPREADS	Other such companies are organized on the same philanthropic principles; the Gothenburg "system" develops. The spread of the system occurs under local initiative without compulsion by the national government (2:16).
	CRIMES DECREASE	A decrease in crimes and misdemeanors is traceable to drink (1:348; 2:13-14).
1873	SYSTEM LEGALIZED	In a legal authorization of the system idea, a national regulation divides surplus earnings equitably between community, county, and agricultural interests (2:15).
1874	DRUNKENNESS DECLINES	To further curtail the incidence of drunkenness, Gothenburg brings the retail spirit traffic under control of the Company. Cases of delirium tremens and convictions for drunkenness decrease (3:31-33).
1877		Stockholm incorporates the Gothenburg system. The chief of police states that the amount of drunkenness has greatly decreased as a result (3:37).
1895		A national statute declares the purpose of the Gothenburg system is to be the guardianship of the retail and bar trade of brănvin within the city "in the interest of morality" (2:14). Later enactments enlarge and clarify the statute.
1905	SYSTEM MADE MANDATORY	The Gothenburg system is made obligatory in cities by parliamentary enactment; it is now the established method of liquor control.
1905+	CRITICISM BEGINS	The system's limitations in promoting temperance become evident: restrictions are limited to the sale of potato spirits; strong drink and wine are still sold by private dealers; local authorities are becoming financially dependent on the system's profits, and expand sales; company monopolies are not always effectively utilized; there are too many loopholes (1:348; 2:15-20-21).
1909	PROHIBITION MOVEMENT BEGINS	A trend toward prohibition develops; it is tried temporarily and with apparent success as an expedient during the 1909 general strike. Encouraged by this success, temperance societies organize a national plebiscite, recording 1,900,000 votes for and only 17,000 votes against prohibition.
	BRATT SYSTEM PROPOSED	Ivan Bratt, a Stockholm physician, proposes a system of restrictions on individual consumption, making retail sales conditional upon a permit issued by the district company, which would exercise strict supervision of purchases and would decide, within the maximum limits fixed by law, on the quantity which each person would be allowed to buy. Bratt argues prohibition would not succeed because of adverse forces and that illicit trade had not had time to make itself felt in the 1909 experiment (2:23-26; 1:349).
1913	GOTHENBURG SYSTEM MODIFIED	Profits from system operations are directed by law to the state in order to overcome heavy local reliance on profits which were stimulating liquor sales.

CHRONOLOGY (Cont'd)

	BRATT APPLIES THEORIES	Bratt puts his ideas into practice; he becomes managing director of the Stockholm company, which he reorganizes under the name Stockholm System.
1917	BRATT SYSTEM LEGALIZED	A Parliamentary committee proposes supporting Bratt's views; his proposals are enacted into law. The general liquor law, effective in 1919, governs the sale of intoxicants in both the retail and service trades.

COMMENTARIES

How the system began -- Goadby, The Gothenburg Licensing System (1895), pp. 10-14.

> "Spirit-drinking has been a national custom in Sweden for three hundred years, and is now a daily domestic practice in the large majority of households....From 1775 to 1788 the distillation of spirit was a Crown monopoly. This became a great hardship, and the agriculturists of the country resented it as interfering with the favourable cultivation of the land. The people resented it because it made their favourite beverage unusually dear. Under these circumstances Gustavus III consented to a series of changes in the direction of free-trade in brandy, or bränvin, as the Swedish spirit is called. The right to distil spirit was therefore attached to the ownership and cultivation of the soil....Every farmer, every peasant who had the assent of the owner of the estate upon which he lived, was permitted to manufacture brandy for a small licence fee, and to sell it in quantities of not less than two pints. Brandy became so cheap, so abundant, so readily procurable, that an epidemic of intoxication swept over the country. Attempts were made to check that by penalties on drunkenness, by limitation of domestic manufacture, and in other ways, as by forming voluntary associations for abstinence from bränvin. In 1829, after every suggestion had been adopted for curtailing the free-trade privilege, short of its absolute withdrawal, there were 173,124 stills at work in the country....
>
> "...After endless efforts a healthy public opinion was created; a Temperance League, 90,000 strong, was formed; literature was issued; medical men took up the cause; and petitions began to pour in upon the King, Oscar II, himself a champion of temperance...It was in this mighty popular ferment that the idea arose of substituting popular control for free distillation--an inspiration the more remarkable as so many towns in the country were without representative government."

The Gothenburg theory -- Thompson, The Control of Liquor in Sweden (1935), pp. 13-14.

> "The theory of the Gothenburg System is simple...The purpose was philanthropic. Public spirited citizens organized to take over and exercise the rights of operating public houses in their city. The idea was to conduct these drinking places in the interests of temperance. The personal-profit motive was eliminated as much as possible. The income of the directors and shareholders in the company, or of the management and help, in the places of business was in no way influenced by the amount of sales. The management and help worked on fixed salary, regardless of the turnover. The shareholders in the company, or, as it became known, the 'system,' received a fixed dividend on their actually invested capital. All surplus profits were turned over to the public. There was thus established what in England has aptly been termed 'disinterested management.' Personally disinterested management in the interests of public welfare was the central idea of the Gothenburg System, and is still the dominating principle of Swedish liquor control."

Pros and cons -- Thompson, Control of Liquor in Sweden (1935), pp. 20-22.

> "Much has been written for and against the Gothenburg System. Its guiding principle was the control of the liquor trade in the interests of temperance and public welfare. It is impossible to evaluate accurately its effectiveness in fulfilling this purpose. Tested by the increasing number of arrests for drunkenness, the record looks bad. Judged by the

COMMENTARIES (Cont'd)

> slightly decreasing per capita consumption of spirits, the score looks a little more promising. But such tests are not adequate criteria. Too many other factors enter in.
>
> "During the period of the Gothenburg plan, a number of influences undoubtedly contributed to temperance....But while other factors were at play effecting a more temperate use of alcohol, it would be unfair to leave the impression that nothing was accomplished by the Gothenburg System. The system companies, concentrating principally on the service trade, did commendable work. The old, disorderly public houses were converted into neat and inviting cafés where wholesome and palatable food was served to working people at prices they could afford to pay. Such an accomplishment in the life of any people is not to be despised. But, unfortunately, the liquor problem cannot be solved by attacking it from any one angle....
>
> "The cardinal weakness of the system companies, under the Gothenburg System, was the lack of a monopoly. They not only lacked it, but they often failed to utilize effectively the monopoly which they possessed. Too many gates were left open to unregulated sale. The companies frequently were limited to a control of branvin in its various forms, while wines and imported liquors were handled by agencies outside of their jurisdiction. As a rule, they did not concern themselves with the wine and beer trade at all. Company restaurants were operated in the interests of public welfare, without an eye for individual gain, and usually were well managed. But rights to serve liquor were also let out to privately owned and operated restaurants, and the retail trade was frequently turned over to private individuals who were interested in their balance sheets rather than in the welfare of the community. Too frequently the rights exercised by the private restaurant owner or retailer were enjoyed by virtue of a concession from the local authorities, and the company had no voice in the matter.
>
> "Under such conditions, it was impossible to conduct the liquor trade in the interests of public welfare. Denied satisfaction in the system café, the customer could go to the inn, the private restaurant, the retailer, or the wholesaler. The results were anything but desirable."

The limitations of the Gothenburg System -- Marcus, The liquor control system in Sweden, in McCarthy, ed., Drinking and Intoxication (1959), p. 348.

> "The most famous of the companies formed on the basis of this legislation [of 1855] was founded in 1865, in Gothenburg; as a result of this the whole system came to be called the Gothenburg system. The company superseded a large number of the dram shops or saloons in the town and turned them into restaurants for the working classes, where warm food was served at moderate prices. The results of this system soon showed themselves in the decrease in crimes and misdemeanors traceable to drink. The accruing profits were employed for public purposes. The promising beginning of the Gothenburg system soon led to the formation of other companies of the same kind in most of the towns in Sweden.
>
> "Nevertheless it was soon to prove that the capacity of the Gothenburg system to promote temperance was severely restricted. The movement was concerned only with the sale of potato spirit, while such strong drinks as cognac, whisky, punch, etc., for which there now began to be a demand in Sweden, and also all kinds of wine, were sold by private dealers. All restaurants and eating houses, other than those which were directly owned by the company, lay entirely outside its control. Moreover, as most of the surplus profits on the operation of the company were to fall to the local authorities, they later became so dependent financially on these profits that their zeal in keeping the sales within reasonable limits was relaxed."

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16

Alcohol
Sweden
1917-1972

BACKGROUND

In 1917, the Gothenburg system in Sweden was replaced with the Bratt system which, with modifications, remained the principal Swedish mechanism for the control and regulation of alcohol consumption until it was abolished in 1955 and replaced with a far less restrictive form of monopoly control. Not believing in the possibility of total prohibition, Dr. Bratt proposed that restrictions be imposed on the individual, and that individual consumption be controlled through the company system already established in Sweden. The system was designed to attack the abuse of alcohol, not the moderate drinker. Anybody who desired to buy a bottle of spirits for private consumption had to have a permit book (motbok) from the company in his district; the company, within the maximum limits fixed by the law, decided on the quantity which each person was allowed to buy. Permits were granted to people over 21 who had not been found guilty of public drunkenness more than once or who had not been found guilty of certain other crimes. The amount a person was allowed to buy per month varied according to economic means (11:31). The companies were to exercise constant and strict supervision of the purchases of their customers, and to revoke the permits of those who abused them. Although the system never pleased ardent prohibitionists, with its adoption Sweden managed to control the pressures that led her neighbor Finland into adopting total prohibition in the same period.

The evidence for the evaluation of the Bratt system is limited and is difficult to interpret. Whereas it appears to have had little effect on the drinking problem, the liberalization of the system in 1955 did bring an increase in consumption. This increase was later controlled by the imposition of price increases through taxation. In another significant development, a month-long liquor strike in 1963 resulted in a selective restriction on the drinking of strong spirits which at least momentarily did lower consumption and drunkenness rates. On the whole, Swedish history since World War II indicates that alcohol control can affect drinking problems, although more research is needed on how and on whom the various changes worked.

CHRONOLOGY

1917	BRATT SYSTEM LEGALIZED	Bratt system becomes law; effective in 1919, the private retailing of wines and spirits is forbidden and the whole retail trade becomes the monopoly of the system companies. In principal, the law does not oppose wholesale trading by private persons, but Bratt forms his own corporation, Vin-Spritcentralen, to assume control of the wholesale trade.
1919	SYSTEM BECOMES EFFECTIVE	As the system goes into operation, Bratt acquires all private firms in addition to his wholesale monopoly and gives the profits to the state (1:29). The system often meets considerable opposition from drinkers.
c.1920	USE INCREASES	A rationing system is introduced which gives all adults the right to buy a certain amount of spirits monthly. The rations are rather liberal (8:44). Spirit consumption per capita, beer consumption, and total consumption of pure alcohol increases, possibly because of an increase in real wages (11:36).
1920-1929	USE DECLINES	After 1920, and throughout the 1920's, spirits and total pure alcohol consumption per capita falls to below the rates of 1911-1915 (11:36).

CHRONOLOGY (Cont'd)

1922	PROHIBITION REJECTED	As a sign of Bratt's success, prohibition--which was favored by a majority in 1909--is voted down in a plebescite.
1923	CONTROL EXTENDED	The general law of 1917 is amended to include wholesale trade; Sprit-centralen and its subsidiary companies obtain from the government the monopoly of the wholesale trade. The general public becomes accustomed to the restrictions and increasingly admits their justification (2:354).
1925	DRUNK DRIVING LAW	The first drunk driving law is passed.
1938	USE DECLINES: LIMITATIONS CRITICIZED	Sobriety improves considerably; the public is accustomed to restrictions, and consumption declines. The system is criticized for the large amounts of labor and expense entailed in its management (1:121; 2:354).
1939	SERVICE TRADE REGULATED	Those not satisfied with the allowed ration (4 liters per month in 1939) start drinking in restaurants and cafés. The government imposes a limit on the allowance of spirits at restaurants, and service is made contingent upon purchase of hot food. Since restaurants must buy their liquor from the district company, the system becomes the sole source of supply for both individuals and the trade.
	USE DECLINES	The monopoly system is operating effectively, with few abuses. Although the restrictive system strives to eliminate social evils of abuse and not cut down on total consumption, consumption does decline, from 39 million liters in 1913 to 30 million in 1939 (2:353; 1:188). Penalties for drunk driving are changed from fines to imprisonment.
1941	DRUNK DRIVING LAW MODIFIED	The drunk driving law is replaced by a per se law setting minimum level of alcohol at 1.5 per mille.
1944	CRITICISM OF SYSTEM RISES	The Bratt system is increasingly attacked for high operating costs, which are more than the total outlay for temperance work and care of alcoholics combined. The system itself appears to be an inefficient instrument for detecting alcoholics and is perpetuating a standard of alcohol consumption considered still too high. The Government Commission on Temperance Legislation proposes that the system be abolished and that more money be spent on the care of alcoholics, temperance education, youth work and other "positive" measures (5:56).
1954		To encourage temperance boards to increase their activities, the state increases its support to cover 60% of their operating expenses.
1955, October	MOTBOK ABOLISHED; CONTROL LIBERALIZED	Government becomes convinced that if the system does no harm, it is not doing any good. The motbok is abolished, partly because of criticism that the permit system encourages people to drink all their ration.
		The liquor trade remains a state monopoly, but emphasis is now placed on preventive measures, greater freedom for the individual, and less control. Anyone who is over 21 and does not appear to be drunk may now purchase alcohol. Individual permits to purchase liquor are no longer required, and the quantity of drinks served in restaurants is no longer limited.

CHRONOLOGY (Cont'd)

		The law also provides for the study of social problems related to drinking, educational activities, and a hospital for alcoholics (3:355).
1955-1956	USE INCREASES	Rapid initial increase in alcohol sales occurs; 33% more hard liquor is sold in 1955-56 than in the previous year. Convictions for drunkenness and impaired driving also rise dramatically, as do the caseloads of treatment clinics and agencies (3:356; 4:508). Wine sales, however, decrease 19%. The wine monopolies engage in very active advertising and price campaigns to move consumption away from brandy and over to wine and beer (7:111).
1956	TAX INCREASE	Price of potato spirits, the most commonly used distilled drink, is raised 20% by taxation to diminish consumption (3: 356; 5:57).
	USE CHANGES	Demand for spirits declines; consumption of wine increases.
1957	CONTROLS EXTENDED; TEMPERANCE SUPPORTED	Drunkenness arrests and convictions for the whole nation level off. Government authorizes temperance boards to list persons who drink to excess and bar them from buying liquor. Subsidies to temperance boards are raised to 75% of their expenses; inpatient facilities are increased (3:356).
1958	PRICE INCREASE	Prices rise again, bringing the increase to 43% above 1955 (11:34).
1958-63	USE DECLINES	Apparent spirit consumption drops below 1954 level, possibly due to tax increases (4:508). Wine and beer consumption steadies at a level slightly above that of the motbok years (11:34). Drunkenness arrests and convictions drop decisively.
1963	LIQUOR STRIKE	One-month strike of employees in the spirits trade stops distribution completely, although the sale of lighter drinks (beer, wine) continues. Drunkenness arrests and alcoholic treatment admissions sharply decline, but return to previous levels at conclusion of strike (11:30-31).
1965	USE PATTERNS	The abolition of the rationing system combined with increased prices seems to increase consumption "very severely" among heavy drinkers and to decrease slightly the total consumption by "normal users" (7:111).
1969-1972	DECLINE OF TEMPERANCE	Membership in the four largest temperance societies drops from 355,000 in 1910 to 132,000 in 1969. Abstention declines among youth, with percentages of abstainers among 15- to 24-year-olds changing from 38% in 1947 to 11% in 1969, and to 7% in 1972 (6:293).

COMMENTARIES

The strength of the Bratt system -- Marcus, Liquor control system in Sweden, in McCarthy, ed. Drinking and Intoxication (1959), p. 354.

"In the years when Dr. Bratt was engaged in a long struggle for his ideas, he divided the Swedish people into two classes on the basis of their attitude to the question of temperance: those who called for total prohibition, and those who, advocating status quo, opposed any kind of reform. The Bratt system took a middle course. In the first place it

COMMENTARIES (Cont'd)

> attacked abuse and left the moderate drinker in peace as far as possible. These ideas have been in a great measure realized. Sobriety has improved considerably, and it cannot be denied that the activities of the system have contributed to this satisfactory result, though there are different opinions as to its importance in relation to other nonlegislative factors. During its life the system has had to weather many storms, and at times it was near foundering. But it was borne up by ideas which have proved their lasting vitality, and its principal features have never been shaken."

Bratt: pro and con -- Thompson, Control of Liquor in Sweden (1935), pp. 214-215.

> "A convincing argument is presented for the merits of the restriction system when one compares the situation before and after its establishment. Improvement has resulted in a mitigation of the evils which accompany excessive indulgence. It is, of course, questionable to what extent the plan of control has been a determining factor, but even its opponents must acknowledge that it has had a wholesome influence. But they insist that what has been achieved in Sweden under individual control has been realized in other countries on a greater scale by the simpler device of increased liquor prices, and they cite comparative statistics to prove their case."

The weakness of the Bratt system -- Elmer, Change of temperance policy in Sweden, Brit. J. Add. (1957), p. 56.

> "The Bratt system of rationing cost more money than the total grants to temperance work and the costs for the care of alcoholics taken together. The change of temperance policy in Sweden which took place in 1954 involved in the first place that less interest was taken in sales legislation and more interest was devoted to the care of alcoholics, temperance education, youth work and such more 'positive measures.' While the Bratt system seemed to have had quite an effect in sobering up the nation during its first years, it was felt in wide circles that the system no longer had such beneficial results. The development of alcohol consumption, drunkenness in public places, especially such offences committed by young people under the age of 25, had shown an unfavorable tendency since the mid 1920s. It was inefficient as an instrument of detecting alcoholics, and like all rationing systems, the Bratt system was said to evoke a general interest in the commodity rationed. People tended to drink up to the limit set to them by the local system company, and the quantity measured out by the company was looked upon as not involving any danger of abuse. Besides, it was not difficult to get more illegally."

State monopolies: Bratt and its aftermath -- Popham and Schmidt, Effectiveness of legal measures in the prevention of alcohol problems, Addictive Diseases (1976), pp. 507-508.

> "Certainly in the past there have been monopoly systems which clearly had the control of alcohol problems as a primary objective [as opposed to revenue-producing]. In some instances, these have involved attempts to monitor individual use, prevent consumption beyond a specified level, and exclude identified problem drinkers from purchasing. The effectiveness of such systems has rarely been studied, and never with conclusive results. The Bratt system in Sweden is a case in point. It was abolished in 1955 and replaced by a far less restrictive form of monopoly control...the change was followed by a rapid initial increase in alcohol sales, drunkenness arrests and impaired driving. But by 1958, apparent consumption had dropped below the 1954 level. However, since substantial tax increases had been imposed by that time--which could have been responsible for the decline--no conclusion can be drawn from the post-1955 trends as to the relative effectiveness of the two systems of control.
>
> "It may be, as Christie (1965) has suggested, that when a state monopoly is rather comprehensive, and a primary objective is prevention, alcohol problems are less prevalent than they otherwise would be. But then the question becomes whether or not the particular measures which prove effective could not be applied equally well under a licensing system. Presumably under a monopoly both the number and potential political influence of those with a vested economic interest in higher levels of consumption are less. It would also seem that the implementation and enforcement of various types of control measures, and the

COMMENTARIES (Cont'd)

monitoring of their effects, are facilitated by a centralized system. However, the overriding consideration is probably the emphasis which the controlling authority places on the preventive aspect. When the control of alcohol problems has become secondary to marketing and distribution objectives, a state monopoly system may function, in effect, as a particularly powerful ally of the alcoholic beverage industry."

Alcohol control in Sweden -- Wilkinson, Prevention of Drinking Problems (1970), pp. 29-31.

"At two points during this century, Sweden has made interesting innovations in alcohol control. Furthermore, in 1963 the country experienced a liquor strike which amounted to a selective restriction on the drinking of strong spirits...

"Ironically, the very fact that the strike was not meant to be an alcohol control measure gives it a unique advantage as a test of just that--alcohol control....To what extent drinkers, normal or otherwise, switched to lighter alcoholic drinks (during the strike) is not clear. Likewise, we do not know if the strike had its apparent effects because it is physically more difficult to get drunk on light beverages, or because the social drinking situations associated with spirits were often less restraining than those associated with beer, et cetera...

"A more serious qualification is that the strike lasted only a short period. Had it gone on longer, the apparent effect might have been the same as in Prohibition in the United States: an initial decline in reported drinking problems, followed by an upswing as bootlegging became organized and sections of public demand hardened in the bootleggers' favor. This shifts the question from 'Can alcohol control reduce drinking problems at all?' to 'Can the reduction be sustained?' Even to indicate a 'yes' to the first question is some step forward. The challenge then becomes one of devising alcohol control that is less vulnerable to bootlegging than a total prohibition of spirits, yet not so bland that it has no effect at all."

The Bratt System -- Wilkinson, Prevention of Drinking Problems (1970), p. 35.

"The effect on drinking problems of the system as initially established is much harder to gauge than the effect of later revisions. The program was put into effect on a nationwide basis at the beginning of 1919. It became known as the Bratt system, after Dr. Bratt, a young physician who had already pioneered it in Stockholm. From the start, the problem included the motbok control, public ownership of the wine and liquor business, increased liquor taxation, and licensing controls that favored lighter beverages and drinking with meals. The establishment of the system reinforced, or at least accompanied, a general shift in Swedish drinking habits to consumption at home and in restaurants with full meals. Apart from this, the program had no discernible effect on consumption during its first two years....After 1920, spirits consumption and total pure alcohol consumption per capita fell; throughout the 1920's they remained below the levels of the immediate prewar years, 1911-1915. By contrast, beer and wine consumption remained above their prewar levels.

"Statistics on alcoholism and drunkenness offenses followed roughly the same trend--a short, sharp rise, then a fall--but these are even more difficult to interpret....On balance, the establishment of the Bratt system seems to have had no effect on drinking problems, at least not on public drunkenness, for during World War I and the early postwar period the conviction rate for all offenses took approximately the same course as the conviction rates for drunkenness."

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17

Alcohol

Finland

1800-1932

BACKGROUND

The Finns have a history of more ambivalence toward alcohol than the Swedes. On the one hand, they have a reputation for a particularly strong thirst and reckless drinking. For example, the estimated per capita rate of arrests for drunkenness in 1954 was seven times higher than that in Sweden (2:365). Their drinking pattern centers on occasional, irregular, unrestrained drinking rather than on restrained regular drinking. On the other hand, their temperance movement has been much stronger than that in Sweden and between 1917 and 1932 the country experimented with national prohibition. As Bruun observes, few countries have tried to control alcohol as compulsively as Finland, where a long tradition has regarded alcohol as primarily a moral question and vigorously condemned its use (5:548). This perspective traces the early Finnish attempts to control production and consumption, the rise of the temperance movement, and the effects of its prohibition period.

CHRONOLOGY

1800	LIBERALIZATION; TAXATION	A law regulating alcohol grants the right of manufacture and sale to all burghers and landowners, and imposes a tax. But because no limit is placed on home manufacture of intoxicants, drunkenness increases (1:26-7).
1829	CONTROLS EXTENDED	An attempt is made to combat drunkenness through fines and an enactment limiting the quantity permitted to home manufacturers.
1830s	TEMPERANCE MOVEMENT BEGINS	Earliest signs of a home temperance movement appear, influenced by the temperance movement in the United States.
1841	TAX REPEALED; PRODUCTION RISES	In an attempt to decrease the production of alcohol, the liquor tax is repealed upon the surrender of the right to home manufacture. Results are disappointing. Modern distilleries take over the right and produce more than the farmers did (1:29).
1856	FURTHER RESTRICTION	An enactment limiting the period for which distilleries may run is passed and cuts production. However, the central problem of reforming the liquor laws--the revision of the law of 1800--still remains.
1865-6	PROHIBITION OF HOME MANUFACTURE	The Liquor Law of 1865, effective in 1866, prohibits all home manufacture of spirits, shifts production to an industrial basis, prohibits rural sales and limits urban sales through the grant of 2-year licenses (2:356-357; 1:30).
	USE DECLINES	Decrease in consumption results.
1880s-90s	URBAN DRUNKENNESS	Increasing industrialization causes migration to cities, where drunkenness becomes a problem among the unskilled laborers (2:357).
1884	PROHIBITION MOVEMENT GROWS	Strong absolutist movement rises, in close alliance with Lutheran religious thinking. The Friends of Temperance is established in Helsinki. (1:31; 2:357)

CHRONOLOGY (Cont'd)

1886	MOVEMENT SPREADS; SHIFT TO LEGAL COERCION	Friends of Temperance obtains a yearly subsidy from the state and the movement gains in strength. It includes the upper classes but draws much leadership and support from the masses. As propaganda alone proves ineffective, legal coercion is emphasized. Due to absolutist pressures, the policy measures that are introduced are legislative and restrictive, reflecting the attitude that excessive drinking is sinful and immoral (1:32-3; 2:357).
1885-91	CONTROLS INCREASED	The sale of alcohol is regulated and restricted in 1885. Regulations are imposed on beer (1883) and wine (1895). Duties on imported liquors are increased in 1886 and 1888. The tax on domestic liquor is raised in 1889. In 1891, a law is passed (effective 1893) regulating all alcoholic beverages of 22% and over, prohibiting rural sales, and regulating the liquor trade in the cities through the use of the Swedish Gothenburg system (see persp. 15) (2:30-5).
1898-1901	PROHIBITION PRESSURE	In 1898, labor leaders adopt the policy of a "drinking strike." Movement has strong temporary appeal. Workers Absolutist Associations are founded. In 1900, parliament officially is asked by a petition of 140,000 names to promote immediate prohibition laws. In 1901, the Workers Party adopts total prohibition as part of its program and the Temperance Movement makes steady progress. (1:36-7; 2:359)
1904	LIBERALIZATION URGED	Recognizing the need to rework alcohol legislation, the government appoints a committee to develop a policy "to diminish the consumption of alcohol, to prevent its abuse, and to check its consequent injurious effects." The committee recommends a liberal program. (2:357-8)
1906	PROHIBITION PRESSURE	Drastic parliamentary reform replaces the old Diet with a democratic national legislature, which includes wider representation of the working class. Women are given the right to vote. Both workers and women tend to prohibitionist thinking.
1907	PROHIBITION ATTEMPTED	The new Diet meets, rejects the recommendations of the committee, and passes a bill prepared by Friends of Temperance designed to introduce total prohibition in Finland. The bill, however, is not enforced (2:357; 1:38-40).
1908	POLITICAL RESPONSE	Mass demonstrations are organized by Labor with the sympathy of the absolutist movement to protest the delay. The Religious Workers Party makes an official inquiry regarding the delay.
1909-14		Promulgation is continually refused. While parliament is determinedly for prohibition, the government, under the influence of the Russian administration, is determinedly against it.
World War I	TRADE BAN	Liquor trade is made virtually illegal through temporary wartime administrative legislation but not via parliamentary process.

CHRONOLOGY (Cont'd)

1917	PROHIBITION ENACTED	Prohibition is passed and ratified by the first parliament of independent Finland. The law, effective July 1, 1919, forbids the production, import, sale, transport and storage of alcohol except for medical, technical, and scientific purposes. A Temperance Department is created to supervise the enforcement of the law. (1:56; 2:362)
1919-1921	PROHIBITION FAILS	Prohibition Law is not respected; illicit distillation burdens the police force, and smuggling from other countries such as Germany and Estonia increases. Drinking continues under cover, and crimes of violence increase rapidly. Attempts at enforcement during 1920 and 1921 show that drastic revision is necessary. (1:59-73; 2:362)
1922	LAW MODIFIED	Greatly extended law replaces the first prohibition enactment.
1926	USE INCREASES	An Alcohol Committee is charged to supervise investigations into consumption, social effects of prohibition, and success of enforcement. The Committee circulates questionnaires to sound out public opinion. Its report in 1926 indicates that consumption had increased, especially among the young; that drunkenness had increased, especially in rural areas; and that prohibition had failed in its main purpose, and had produced new difficulties (1:91-3).
1920's	REPEAL MOVEMENT RISES	Opponents of prohibition begin to make their voice heard. Prohibition is seen as an infringement on individual liberty. Antiprohibition associations form. In the late 20s, leading citizens appraise prohibition unfavorably in the press (1:207-208, 224-32). In 1926, abolishment of prohibition becomes a matter of political exploitation. The Liberal Party suggests the use of a referendum. The Agrarian and Social Democrat parties, which continue to support prohibition, do not offer resistance to the idea of a referendum.
1931	GOVERNMENT DEBATE	A government-appointed research committee recommends that some liquor be allowed and that wine up to 11% and beer up to 3.2% should be free. Alcoholic beverage sales are considered as a possible state revenue source during the severe budget deficits of the depression years.
	PROHIBITION REPEAL	A referendum is held for voters to decide between the maintenance of prohibition, the free production and sale of mild drinks, and the free production and sale of all spirits. A majority of 70.6% support the third proposition (2:363).
1932	END OF PROHIBITION	Prohibition era ends. New legislation is drawn up that would merely restrict consumption. A State Alcohol Monopoly is established to manage the production, distribution, and sale of alcoholic drinks.

COMMENTARIES

Finnish drinking and social control -- Ahlström-Laakso, European drinking habits, in Everett et al., ed., Cross Cultural Approaches to the Study of Alcohol (1971), pp. 128-129.

> "Finns have won a reputation for a particularly strong Finnish thirst, for a reckless manner of quenching it, and for seeking an escape from routine cares in drink with a splendid disregard for the consequences. The concept of the "Finnish booze head" is played up not only in magazines and popular literature but also by research scholars who took it seriously as early as the 1940's. The "booze head" concept has been used not only to describe reality but also to support the validity of temperance ideology in its applicability to Finns. Additionally, the concept of the hard-drinking Finn has ever been looked upon as something to brag about a little; a parallel to the Finnish style is found in the reckless sousing of the Irish. A contrast is found mainly in the restrained and civilized way in which Jews and Italians take alcohol.
>
> "The release of aggression through drinking as observed among Scandinavians and Anglo-Saxons, especially the Finns and the Irish, has been explained in the light of the ambivalence of their cultures. In the attiudes toward the use of alcohol, expressions of both categoric rejection and outright idealization of drunkenness prevail side by side (Pittman 1964). Owing to this ambivalence, no universal norms applicable to the use of alcohol have evolved but only norms propagated by small groups. When alcohol is discussed in small groups in special situations, such discussions do not result in creating norms, that is, norms to be passed on from generation to generation.
>
> "Reflecting the absence of informal norms, for example, is the fact that formal social control of drunkenness is created through statutory machinery. These legislated controls are necessary because the informal control deriving from some generally accepted norm concerning this behavior is virtually nonexistent. This is shown, for instance, in an investigation recently made to find an explanation for the fact that Helsinki has a rate of arrests for drunkenness from seven to thirteen times higher than Copenhagen, despite the fact that the actual frequency of drunkenness is only slightly higher in the Finnish capital than in the Danish capital. The answer to this apparent contradiction was that the control machinery set up in the two cultures has a very different meaning in each. The values upheld in Helsinki as the basis for the social control of drunkenness favor such control. They emanate from the community and emphasize public security, the maintenance of order, and esthetic considerations. The values applied in the control system in Copenhagen reflect community opposition to control, quite contrary to Helsinki."

The effects of prohibition -- Sariola, Prohibition in Finland, in McCarthy, ed., Drinking and Intoxication (1959), pp. 362-66 .363..

> "With the start of prohibition, general attention became focused on a more practical level of consideration. The law soon necessitated a network of officials, inspectors and boards in charge of alcohol crimes. Among other agencies, the police force was heavily burdened with cases of home distillation and smuggling....
>
> "Many other consequences of the prohibition law now became apparent. Drinking went on under cover. The law was ridiculed by the degree to which it was violated in the broad layers of society. Drinking habits were influenced unfavorably. Crimes of violence increased rapidly. Even those who had been used to moderate drinking were dissatisfied by the state of affairs, and many people who earlier had been indifferent about the goals of Drys and Wets began to get interested in the liquor question and generally tended to take sides with the Wets....
>
> "Although in the analysis of the reaction against prohibition all the factors cannot readily be identified, it is apparent that there was a general resentment of the excessive interference in private matters by the officials in charge of alcohol inspection. Furthermore, unemployment appeared to have made people realize that economic necessities might sometimes prove some ideas impractical. Also, a strong patriotic movement had arisen in reaction to Communist propaganda work during the depression years. This movement opposed strongly the 'political hypocrisy' displayed in parliamentary discussions on prohibition."

COMMENTARIES (Cont'd)

The lessons of prohibition -- Bruun, Implications of legislation relating to alcoholism and drug dependence, in Whitney, ed., World Dialogue on Alcohol and Drug Dependence (1970), p. 177.

> "It is often erroneously inferred from the fact that prohibition failed that legal action and changes in governmental policies exert only a minor effect upon the alcohol situation. This erroneous view is understandable as the aim was that of solving the total alcohol question. We are now much more moderate--we are forced to accept damage from the use of alcohol and other drugs and what we are trying to do is to diminish it. And probably not even all, but a specific type of damage. Prohibition certainly exercised an influence and the hard lesson learnt is that unintended consequences become more apparent than intended ones."

The efficacy of legislative enactments -- Wuorinen, Prohibition Experiment in Finland (1937), p. 233.

> "Probably the basic reason for the difficulties which admittedly exist in the enforcement of prohibition is that the law appears to have been based upon a misplaced confidence in the efficacy of legislative enactments in convincing public sentiment that the use of intoxicants is harmful and dangerous to society. During the decades before 1919, when the temperance movement was making notable gains, moral suasion produced the results. Individual conviction of the evil effects of strong drink led to individual abstinence. As the temperance movement grew and its objective became the ambitious project of getting rid of all intoxicants, the notion seems to have gained ground that a legislative fiat banning liquor would be no less effective in promoting national sobriety than a personal decision to abstain from alcohol had been in promoting individual sobriety. In other words, a national legislature acting for the nation, it was believed, could accomplish the same result that had been accomplished by the individual led by conviction to avoid the dangers of liquor by abstaining from intoxicants altogether. The past decade has shown rather definitely that there is a profound difference between the so-called national will here implied and the will of the individual, and that the anology used by the temperance enthusiasts in their agitation for prohibition was as untenable in fact as it was persuasive in theory."

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18

Alcohol
Finland
1932-1972

BACKGROUND

The principal aim of the new policy inaugurated in 1932 was to simply move one step away from prohibition and still keep use to a minimum. A State Alcohol Monopoly was established to control and limit consumption, and to exclude private vested interest. Only the monopoly was authorized to issue licenses to restaurants, and until 1968 it was a criminal offense to appear drunk in public. A pricing policy also favored mild alcoholic beverages such as beer and wine. Such differential taxation was based on the belief that alcoholic beverages differ in their behavioral effects, and that beer is a drink of moderation (See Popham and Schmidt, 1976:505 for a discussion of this subject). Even after prohibition, conditions in rural areas remained much the same as during it; liquor stores were not permitted in rural areas. Later a buyer surveillance system was inaugurated to identify excessive drinkers and limit their access to alcohol. As Bruun et al. (1975:80) observe: "In effect the system involved a built-in conflict of roles between the monopoly as supplier, government revenue earner, and as overseer of a minimum level of consumption."

In reaction to the system's restrictions, the laws were liberalized in 1969, bringing about a sharp rise in the number of outlets selling alcohol and allowing sales in rural areas for the first time. The experience provides some of the best evidence available concerning what happens when outlets dispensing psychoactive substances are suddenly established in areas previously isolated from legal supply. On the whole, it appears that in Finland liberalization brought an increase in consumption.

CHRONOLOGY

1932	MONOPOLY ESTABLISHED	Following the repeal of prohibition, a State Alcohol Monopoly is established. Production, distribution, and sale of alcoholic beverages is controlled by a State-owned and -operated company, with a 10-member board that is responsible for policy; the profits of the company go to the state. This monopoly seeks to ensure that "the liquor trade shall be arranged in a manner to check illegal trade in alcohol, reduce consumption of alcohol to the minimum, and to prevent drunkenness and its injurious aspects." The monopoly maintains liquor stores in cities only; retail stores are still banned in rural areas. Social welfare boards replace legal institutions as "the solution" to deviant behavior (1:364; 2:191-5).
1939-1945	WORLD WAR II	While Finland is involved in World War II, alcohol consumption patterns are exceptional, but in the 40's and 50's society returns to normal.
1945+	BUYER SURVEILLANCE	The monopoly institutes an individual inspection system of the buyers by means of a passbook that records all purchases. It prescribes no quotas, but abuses and excessive use leads to withdrawal of the personal license. The monopoly employs inspectors to judge each individual case of misuse, and to issue official warnings. The decision to withdraw a license is made by a committee to which the community and the monopoly appoint members. This system is a kind of continuance of prohibition but applied to heavy drinkers only (3:550-1).
	SURVEILLANCE MODIFIED	Buyer surveillance system is not successful for treatment of alcoholics, later it is modified and a treatment approach is added (3:551).

CHRONOLOGY (Cont'd)

1950	PRICE CONTROLS	Alcohol policy measures continue to favor mild drinks over spirits both in price and increase of purchase. The price of alcoholic beverages is 10% higher in 1950 than in 1935, and 10% higher in 1960 than the 1950's. However, due exclusively to price increases in strong liquors, wine and beer become cheaper (1:364; 4:32).
1951	USE PATTERNS	Alcohol consumption in Finland is lower than most European countries (1.8 liters absolute alcohol per capita in 1951) but the pattern of drinking at irregular intervals and consuming great quantities at one time continues. This is reflected in a very high per capita rate of arrests for drunkenness, a high homicide rate, and a high frequency of alcoholic psychoses (1:364-5; 4:49).
	ALCOHOL RESEARCH	The Department for Social Research and the Foundation for the Study of Alcohol Problems are established in the monopoly to study Finnish alcohol problems. The foundation gathers scientific evidence for the orientation of future liquor policy, gives grants for outside research and initiates its own projects in sociological and psychological research.
1950's	TEMPERANCE MOVEMENTS	Temperance movement is still strong and has government support. It continues to oppose expansion of the liquor trade. Local communities have the right to veto the establishment of liquor stores.
	BEER USE EXTENDED	The Alcohol Legislation Committee permits the introduction of beer into rural areas, providing the community gives its consent. A study is made on the effect of opening wine and beer stores in selected "dry" market towns in rural areas, using pre- and post-test measurements of alcohol conditions in those localities. Findings suggest there is an appreciable effect on consumption, though the increase is in part offset by a decline in consumption of illicit alcohol. While information is derived on the behavior of rural populations, evaluation of the results, as regards alcohol policy value, is not simple or clear (9:229-231; 5:500; 11:109).
1969	LIBERALIZATION	Medium-strength beer is released for unrestricted retail distribution (previously it was only available through the State Monopoly). At the same time prohibition is abolished in rural (dry) areas and retail liquor stores no longer need permits (5:500; 6; 7).
1969-1975	EFFECTS	Liberalization of legislation in 1969 induces a 47% rise in consumption over the 1968 level. Medium-strength beer released for unrestricted retail distribution apparently accounts for most of the increase in consumption (3:458). But in following years, strong drinks increase at the same rate as before. Liberalization raises the total consumption to a new level (8:351). The increase spreads in such a way as to cause an increase in the proportion of heavy consumers. Consumption increases from 2.9 liters of absolute alcohol per capita in 1968 to 4.2 in 1969. The increase might have been less dramatic if the legislative changes had been accompanied by government action in respect to prices (4:177-8).

CHRONOLOGY (Cont'd)

1972	LIQUOR STRIKE	Retail liquor store employees go on strike, causing a suspension of ale sales for five weeks, although it was still available in licensed restaurants. The average daily arrests for drunkenness decreases 54%, affecting most the alcohol behavior of occasional drunks with a relatively firmly established social standing. It also has a restraining effect on the most socially detached and alcoholized groups (8:355).

COMMENTARIES

A description of Finnish policy, 1970 -- Bruun, Implications of legislation relating to alcoholism and drug dependence, (1970), pp. 175-176.

> "The temperance movement in Finland is...concerned primarily with the phase of choice--in trying to minimize the number of occasions when alcoholic beverages are going to be used. The temperance movement is not only financed by state and municipal authorities--there is in every municipal area a special temperance board whose fundamental job is to support local temperance organizations, while the Social Affairs and Health has a special division which gives advice to these boards and support to the temperance movement....
>
> "The phase of use is primarily controlled by the restaurants....Restaurants in Finland are under strict control as to price and, in accordance with the philosophy advocated, attempts have been made to interpret restaurant drinking as less dangerous than drinking in other places....However, Finnish studies have not produced any evidence that drinking in a restaurant is more inclined to moderation than other drinking. Most important is the alcohol policy implemented by the Monopoly, which regulates prices, availability and some other variables and makes an endeavour to favour milder alcoholic beverages with the aim of substituting them for stronger ones. There is considerable disagreement on this policy."

Effects of the Finnish pricing policy -- Mäkelä, Consumption level and cultural drinking patterns as determinants of alcohol problems, J. Drug Issues (1975), pp. 350-351.

> "The pricing policy of the Finnish State Alcohol Monopoly has for a couple of decades favored mild alcoholic beverages. The idea has been that any increase in the proportion of wines and beer consumed would also lead to more moderate drinking habits. The proportion of light beverages consumed has increased, it is true, but this by no means appears to be due to any general adoption of continental European customs of drinking in moderate quantities with meals. Surveys indicate that heavy consumers in particular have switched over to wines because they constitute the most price conscious consumer group (Mäkelä 1971b). From the standpoint of alcohol policy, it is perhaps desirable that alcoholics and other heavy drinkers concentrate their consumption on the 'softer' varieties of alcoholic drinks. But this does not mean that the pricing policy adopted has had the effect of generally moderating drinking habits."

Alcohol consumption levels since 1969 -- Mäkelä, Consumption level and cultural drinking patterns as determinants of alcohol problems, J. Drug Issues (1975), pp. 351-352.

> "An investigation of alcohol consumption made in Finland on the basis of interviews conducted before and after the new alcohol legislation indicates that following the 1969 reform small consumers increased their ingestion of alcoholic beverages more than did big consumers. It would nevertheless appear as if all the consumer groups increased their ingestion of alcohol roughly in relation to their previous consumption level....
>
> "The liberalization of alcohol policy...brought about, on the one hand, an increase in consumption and, on the other, created new drinking practices. But it did not moderate previously developed habits. The great increase in the number of times beer was drunk in small quantities reduced the average ingestion per time. If attention is paid only to such averages, the drinking habits appear to have become more moderate. Any estimation of the situation based on averages would, however, be misleading, for the occasions on which heavy drinking, too, took place became more common."

COMMENTARIES (Cont'd)

The influence of price and access to consumption -- Brunn, Implications of Legislation relating to alcoholism and drug dependence (1970), pp. 177-178.

> "Econometric studies in Finland have demonstrated that price policy exerts a powerful influence upon the structure of consumption. The power to decide prices is also perceived as the most powerful tool in the alcohol policy adopted by the Finnish State Alcohol Monopoly. Not only prices but also access to alcohol might exercise considerable influence upon the consumption level. There is evidence from both Norway and Finland that small changes in the availability exert no more than a minor effect upon the consumption level. Against this, however, a new Act in Finland, which came into force at the beginning of 1969, changed the situation dramatically, abolishing prohibition in rural areas, and increased the number of outlets from which beer may be purchased. The heavy increase in consumption resulting from these legislative changes could probably have been less dramatic if this change in the law had been accompanied by government action say in respect to prices."

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19

Alcohol
Colonial America
1606-1774

BACKGROUND

A consistent theme within the literature on substance use and abuse in American history has been the influence of Puritanism. It is, therefore, critical to determine precisely what the Puritan attitudes were, and what influence these attitudes had in molding subsequent American history. The primary substance of concern to colonial Americans was alcohol, although many considered tobacco use to be as great a problem. Contemporary reactions suggest that drunkenness was probably more prominent--or at least more visible--in the New World than in the Old. Concern over drunkenness was widespread among the colonies, particularly after 1700 when the use of distilled liquors and the number of taverns increased dramatically. But, contrary to the stereotype, Puritans neither detested nor prohibited alcohol use. They did constantly reproach errant drinkers for damaging themselves, denying the power of Godliness, and wasting time. Drunkenness was a sin that had to be eradicated from the community, and the drunkard himself had to be reformed in order to have his soul saved. However, there was little emotional or social intensity surrounding the subject, no organized attempt to restrict the normal use of intoxicants and no widespread condemnation of spiritous liquors per se. The Puritans considered alcoholic beverages a beneficial gift of God; only its abuse was condemned. Following English precedents, they established taverns, inns, and ordinaries to provide accommodations for strangers and travelers, places for the transaction of public business, and "refreshment of mankind in a reasonable manner" (5:14). Consumption was well integrated into the pattern of family life (8). They manufactured liquor in their homes and consumed all types, especially beer, as a normal part of their diet; it was utilized during funerals and religious ceremonies, and figured prominently in colonial trade, the local economy, and revenue collection. Even drunkards were viewed less as criminals than as sinners to be redeemed. While severe punishments were often meted out, the law was also often quite lenient; when punishment was deemed necessary it was viewed as a means to assist in repentance. The period's one attempt at prohibition occurred not in Puritan New England but in Georgia in 1733. The demand for total abstinence, as opposed to temperance, would be a later development in American history.

CHRONOLOGY

1606	FIRST CONCERN	The first mention of an alcohol problem insofar as American law is concerned appears in the Instruction of November 1606 from England to the colonies: local presidents and councils are authorized "to punish all manner of excesse, through drunkenness or otherwise" (1:337).
1619	DRUNKENNESS BANNED	Virginia enacts law against playing dice, cards, drunkenness, idleness, and excess in apparel (3:16).
1622	CONCERN GROWS	Sir Frances Wyatt, Governor of Virginia, is advised by the London Company to effect a "speedie redress" of the enormous excess of drinking, the "cry whereof cannot but have gone to Heaven, since the infamy hath spread itself to all that have heard the name Virginia" (5:3).
1629	CONCERN OVER INDIANS	Fear grows of drunken Indians. Governor Endicott of Virginia is warned by the Massachusetts Bay Company to take precautions lest the savages "be induced to the excessive use or rather abuse of strong waters." Despite these fears, total prohibition of the liquor traffic remains undesirable; attempts are made to restrict its sale to Indians (5:4-5; 3:16).

CHRONOLOGY (Cont'd)

1632	DRUNKENNESS BANNED	Virginia enacts the provisions of the law of England against drunkenness.
1633	LICENSING	Massachusetts Bay stipulates that the Governor's permit is necessary to sell liquor, declaring that already many are "distempering themselves in drinke" (3:17).
1634	PRICE FIXING	A Massachusetts ordinance tries to combat the exorbitant cost of liquor, created by a high demand and low supply, by fixing the price of beer (5:15).
1635	LICENSING	Massachusetts enacts a law providing for the court to issue licenses for the sale of liquor; heavy penalties are provided for violators (3:18). At first only a few licenses are issued in Boston (4:363).
1636	HOME USE RESTRICTED	Law attempts to control widespread abuse of home-brewed in Massachusetts by ordering an end to serving drinks to guests at home; law has little effect (4:359-60).
1637	CONCERNS EXPRESSED	The first brewery in America is built by Captain Sedgwick in Massachusetts; at the same time, the colony's General Court complains that "much drunkenness, waste of the good creature of God, mispence of precious time and other disorders" in the taverns and inns require special attention. Close government supervision of taverns is ordered because inebriety is too frequent and thus "God is much dishonoured" and the lawful consumption of wine is fixed at a pint per half hour (4:354, 358). At the same time, however, the court orders that each town establish a man to sell wine and "strong water" lest the public suffer from the lack of proper accommodations (5:4, 7).
1637-1654		Thomas Grey of Massachusetts is arrested six times for drunkenness and punished each time with stocks, fines, and the whip (4:361).
1639	HOME USE RESTRICTED	Massachusetts orders the retailers of wine not to allow it to be drunk in their homes (3:19).
1641	HOPS CULTIVATION	Cultivation of hops is introduced into Massachusetts (3:19).
1642	USE SPREADS	William Bradford (History of Plymouth Plantation) expresses his astonishment at the growth of drunkenness (5:26). Massachusetts establishes a fine of 100 pounds of tobacco for drunkenness (3:19).
1644	EXCISE TAXES	Massachusetts establishes an excise tax on all wines sold at retail by licensed vintners. New York levies excise tax on beer, wine, and brandy. Tariffs and excise taxes begin to be used throughout the colonies for revenue production. (3:20)
1645	USE RESTRICTED	In Massachusetts, drinking more than half a pint at one time is declared excessive, and drinking for more than a half hour is forbidden (3:20).

CHRONOLOGY (Cont'd)

1646-71	USE RESTRICTIONS	New England colonies attempt to establish a precise definition of drunkenness that includes the time spent, amounts, and behavior of drinking persons in order to fix a reasonable limit on what constitutes the abuse of one of God's gifts (4:355).
1649	BEER ENCOURAGED	Massachusetts orders that inns should always keep provided "with good and wholesome beer for the entertainment of strangers who, for want thereof, are necessitated to much needless expense in wine" (3:22).
1650	RESTRICTIONS; TAXES	Connecticut law recognizes the "necessary use" of ordinaries and houses of common entertainment where liquor was sold, but establishes strict rules governing the conduct of proprietors and patrons (5:4). A law is also passed imposing a heavy duty on imported liquors and an excise tax on liquors manufactured in the United States; such revenue-producing measures spread throughout the colonies (3:13, 22).
1654	HOME USE RESTRICTED	Continued widespread abuse of home-manufactured alcohol leads Massachusetts to reaffirm the 1636 prohibition against allowing others to drink within homes. The new laws state, "Notwithstanding the great care this court hath had and the laws made to suppress that swinish sin of drunkenness, yet persons addicted to the vice find out ways to deceive the law." Still, the law has little effect (4:359-60; 3:23).
1658	DISENFRANCHISEMENT	Like many other colonies, Plymouth passes a law disenfranchising drunkards (3:24).
1662	INNS ENCOURAGED	Maryland passes a law to encourage the establishment of inns, with special licenses granting a monopoly of the sale of liquors in a district. Like many other colonies, Maryland seeks to encourage innkeeping, brewing, distilling, and trade (5:6).
1669-77	LENIENT PUNISHMENT	Joseph Birth of Massachusetts is repeatedly arrested for drunkenness and idleness, but unlike Thomas Grey in 1637, he is always treated leniently. He is punished only once and then simply given the choice of paying a fine or sitting in the stocks (4:361).
1670	USE SPREADS	John Higginson, pastor of Salem church, admonishes greater care in the regulation of the sale of liquor. Later he complains that drunkenness is constantly increasing in Massachusetts and that the magistrates are responsible because they have licensed too many ordinaries and public drinking houses (5:51-2).
1671	DRUNKENNESS	Plymouth passes a law affirming that alcohol misuse is a chronic condition among certain common drunkards; the law encompasses all the symptoms which are used today to describe alcoholism (4:355).
1672		Alice Thomas of Massachusetts is fined, whipped, and imprisoned for allowing conduct in her tavern so scandalous that the first laws against prohibition are established (4:363).
	ALCOHOL-WAGE STRIKE	Laborers strike when Massachusetts forbids the payment of wages in the form of alcohol (4:320).

CHRONOLOGY (Cont'd)

1673	INCREASE MATHER	Increase Mather (Wo to Drunkards) writes, "Drink is in itself a good creature of God, and to be received with thankfulness, but the abuse of drink is from Satan; the wine is from God, but the Drunkard is from the Devil." He attacks tavern owners as "corrupters of youth" and evil men responsible for New England's moral decline and laments, "Is not that worse than brutish sin of drunkenness and becomeing a prevailing iniquity all over the country" (4:353-8).
1675-1680	TITHINGMEN ESTABLISHED	The office of tithingman is established in Massachusetts to report liquor violations in homes; apparently unsuccessful, the office is not continued into the 1680's (4:360).
1680's	TAVERN LICENSES INCREASED	Tavern licenses are being issued en masse in Boston; in 1681 alone, at least 42 retail liquor sources are approved (4:362).
1683	BEER MANUFACTURED	Manufacture of beer begins in Pennsylvania under the direction of William Penn (3:29).
1685	USE CONTINUES	John Dunton of England (Letters Written from New England, 1687) comments on the use of alcohol on his visit to Boston: "And yet notwithstanding the law, there are several of them so addicted to it, that they begin to doubt whether it be a Sin or no; and seldom go to Bed without Muddy Brains" (5:42).
1687	RUM IMPORTED	Rum is imported into New York and yields revenue (3:29).
1688	REVENUE	The treasurer of Massachusetts is authorized "to rent, let or farme let the impost of wine, brandy, and rhum, and the rates upon beere, cide, ale and mum" (3:30).
1694	COTTON MATHER	Cotton Mather petitions the General Court of Massachusetts for effective regulation of ordinaries and begins a campaign claiming the horrible religious condition of the country was due to excessive tippling and that a "flood of excessive drinking" had begun to drown Christianity (5:53).
c. 1700	RUM USE; DRUNKENNESS INCREASES	A change comes over colonial drinking customs. Distilled spirits rise in popularity, particularly rum, but also whiskey. Colonies also begin to award liquor licenses with greater liberality. Drunkenness subsequently increases. (5:31ffl, 45)
	RUM MANUFACTURED	The manufacture of rum begins in Boston (3:32).
1710	EXCISE TAX	New York imposes an excise tax on liquors sold at retail (3:32).
1719	SALES RESTRICTED	New Hampshire prohibits sale of liquor to drunkards and decrees that their names shall be posted in public houses (3:33).
1721	BEER ENCOURAGED	The Philadelphia Friends try to encourage a movement to stop the sale of spirits and encourage beer as a substitute.
	RUM REVENUES	The rum revenues for one year are appropriated to the "use benefit, and better support" of Yale college, an example of the typical use of liquor revenues in this period to finance a wide range of local and provincial activities (5:19).

CHRONOLOGY (Cont:d)

1726	COTTON MATHER	Cotton Mather, with 22 other ministers, writes Seasonable Advice Concerning the Tavern, approving the role of public houses, but attacking excessive use of ardent spirits (5:54).
1729	FUNERAL USE	Salem, Massachusetts, provides six gallons of wine for the funeral of a pauper, a common practice which is made illegal in 1742 (3:33).
1733-42	OGLETHORPE; PROHIBITION	Oglethorpe Experiment in Georgia. Governor Oglethorpe, with the support of the English Parliament, declares the importation of "ardent spirits" illegal in Georgia. At first the law is rigidly enforced, but then it drifts into disrepute. Smuggling rises dramatically and the law becomes unenforceable because the majority of the people in Georgia do not regard the sale and use of rum as criminal and thus do not convict violators. In 1739, a riot by drunken hoodlums frightens Savannah magistrates to enforce the law, but in 1742 it is abandoned; the magistrates are convinced that liquor laws cannot be enforced and are persuaded by British merchants that the rum trade is highly profitable. (5:52-8; 9:21-3).
1735	RUM MANUFACTURING INCREASES	Rum is manufactured in increasing quantities in Massachusetts (3:34).
1742	FUNERAL USE BANNED	The Massachusetts General Court forbids the use of wine and rum at funeral services. Increasingly the colonies (by law or by church action) insist on eliminating liquor consumption in connection with funeral ceremonies (3:14).
1743	METHODIST PROTEST	The General Rules of Methodist Church are formulated by John and Charles Wesley, including a prohibition against drunkenness, the buying or selling of spiritous liquors, or drinking them, "except in cases of extreme necessity" (3:35).
1744	USE SPREADS	The Philadelphia Grand Jury, which includes Benjamin Franklin, complains of the enormous increase of public houses in the city, which are estimated to cover a tenth of the city (3:35).
1750	USE SPREADS	The popularity of distilled spirits with all classes increases constantly (5:58). By this time, the county courts in all but three colonies have been given the power to grant liquor licenses or monopolies. As trade becomes more profitable, the idea of increasing license costs to raise money begins. The use of malt liquors over distilled is also encouraged by lower fees (5:9).
1754	WHISKEY USE	Whiskey drinking is reported to be practically universal in Huntington County, Pennsylvania (3:36).
1756	REVENUE CONFLICT; SMUGGLING INCREASES	Connecticut passes an act fining a town 200 pounds if it fails to appoint collectors for the liquor excise. Beginning of a period in which taxes on the liquor trade increase in severity; problems of revenue collecting increase, as does smuggling (5:22).
1760	USE	Acrelius (History of New Sweden) enumerates 48 drinks in use in North America (5:35-36).

CHRONOLOGY (Cont'd)

1773	METHODIST PROHIBITIONS	John Wesley calls for the prohibition of all distilling, perhaps marking the institutional beginnings of abstinence as a reform movement (1:381).
c. 1774	TRADE BOOMS	On the eve of the American Revolution, spiritous liquors have become one of the greatest factors in moving colonial commerce (5:50).

COMMENTARIES

Colonial drinking patterns and attitudes -- Baird, The alcohol problem and the law: III. The beginnings of alcoholic-beverage control laws in America, Q.J. Stud. Alc., 1945-6, pp. 380-382.

> "The Puritan emphasis upon the hard road to salvation through individual effort, its strict church discipline and the watchful supervision of pastors, elders, tithingmen and secular officers, too, should have established a record for sobriety in New England, as compared to Virginia, New York and Old England. The verdict of most historians is, however, to the contrary, although one of the most reliable of contemporary writers thinks it doubtful that the drunkenness laws were enforced as strictly in the South as in the North (Krout, 1925:26 ff.). Whatever be the answers to these questions, the use of...alcoholic beverages was widespread, even at christenings, funerals, ordinations, pastoral convocations and synods, court and legislative sessions, and meetings of town selectmen. There was a great deal of writing and preaching against intemperance, but not against the moderate use of intoxicants until late in the eighteenth century. Although there was an abortive attempt to prohibit the importation of distilled liquors in Virginia in 1735, it was not until 1766 that Methodism, with its principle of denying hard liquors to its followers, was established in America, and it was 1773 before John Wesley declared for prohibition thereof. This, perhaps, was the institutionalized beginning of abstinence as a reform movement in this country.
>
> "...The colonial period was not one in which distinctions were made between drunkards and sufferers from dependence on alcohol. Drunkenness was seen as a voluntary overindulgence, a sin and wasteful of the commodity then regarded as beneficial, destructive also of the earning power of the drunkard, and causative of breaches of other laws and securities. It may also have been, upon occasion, a convenient scapegoat."

The purposes of colonial alcohol laws -- Baird, The alcohol problem and the law: III. The beginnings of the alcoholic-beverage control laws in America, Q.J. Stud. Alc., 1946-7, pp. 272-296.

> "The purpose of the colonial New England alcohol law, when thought of as an entirety, cannot be divorced from that of the other control laws. Clearly enough, the provisions against drunkenness, excessive drinking and Sunday sales were moral precepts enforced by secular law. Here, if anywhere, the canon law came closest to explicit application, although by means of the secular arm. The purpose was to punish and prevent sin. That there were other elements involved, economic and police, is obvious, but the emphasis was upon the moral or ethical. We have seen even the licensing provisions expressed in language which explicitly indicated that the primary purpose was one of supplementing the enactments against drunkenness" (pp. 287).
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> "The lack of complaints, the absence of appeals, the social acceptability of innkeeping, the quality of the licensees, the extent to which drunkenness and excessive drinking were punished and the license system guarded, all go to show that the colonial alcohol law was an accepted and much more than merely tolerated law. The same cannot be said, of course, for the statutes which imposed customs duties and excises" (pp. 292).
>
> "Although expressed in the language and phrases of religion and morals, their criminal law did not differ either in tone or in content or effect from that of England. Although their statutes and orders were expressed in terms that would indicate the primary purpose was one of saving souls, they were well aware of one objective of punishment as a deterrent

COMMENTARIES (Cont'd)

to crime, and they used their criminal measures for simple policing purposes. This purpose is explicit in the records. Although they sought to save souls in the enforcement of the alcohol law, the element of police control was always present. The number of convictions of drunkenness and related offenses, however, went so far beyond simple policing as to warrant the belief that they actually intended to save souls, as well as to express that purpose in their legislation....

"Sometime during or toward the end of the period studied the legislators may have become more interested in policing the alcohol industry and in maintaining public order than in the moral duty of saving souls. We cannot say with exactness when this occurred. But the language of soul-saving lived on in the records of the courts, and still lives in those state codes in which drunkenness is now classified as an offense against decency and morals" (pp. 293).

"If these people had not had, before they came to New England, the idea that drunkenness was a sin, they got it here. If they had not before had the idea that the business of manufacture and sale of intoxicating liquors was a privilege to be granted or taken away by government, they got it here. The English beginnings of this law had been transported to this country, lock, stock and barrel. But the colonists gave those beginnings strength and meaning. In New England, over the years 1623-1789, these doctrines, with the cluster of definitions which surrounds them, were to become so firmly fixed in common belief that there has never since been a successful contradiction in court or legislature." (pp. 295-6).

Colonial attitudes -- Cherrington, Evolution of Prohibition (1969), pp. 10-11.

"The seed of drinking customs...early planted in the New World yielded a prolific harvest. The use of intoxicating liquors as beverages, begun at those early dates, increased by leaps and bounds. There was no condemnation of intoxicating liquors as such. There was no attitude of hostility to intoxicants even on the part of the moral and religious forces. The only phase of the question which served to arouse any opposition was that which presented itself in the form of drunkenness. There was indeed in those days no scientific knowledge of the evil physiological effects of alcohol on the human system. The only sin therefore which in any sense came under the ban of social condemnation was that of excess which expressed itself in speech and manner.

"This general condition characterized the entire colonial period. All that could be designated as temperance reform work in the 168 years from the founding of Jamestown in 1607 to the outbreak of the Revolutionary War in 1775 was the activity which contented itself in agitation and legislation against the evil of drunkenness. Liquors in themselves were considered wholesome and necessary. When used in the kind of moderation which stopped short of drunkenness they were considered helpful and stimulating. Only when used to excess were they condemned."

Alcohol and the Puritans -- Lender, Drunkenness as an offense in early New England, Q.J. Stud. Alc. (1973), pp. 353-366.

Aided in part by the modern Prohibition movement, later generations established the picture of the intolerant "Puritans" who irrationally condemned not only intoxication but all alcohol use. This is a misconception. Liquor figured prominently in early New England's trade and local economy, and was consumed widely at social and religious functions. While drunkenness was labeled a serious sin, New England Puritans never railed blindly at the sin of "drink" and took extreme care in defining drunkenness [pp. 353-4]. They acted carefully, not irrationally; without condemning alcohol, they tried to fix reasonable limits on what constituted the abuse of one of God's gifts [p. 5]. Rather than being condemned, the drunkard was a prime candidate for redemption. Only intoxication was sinful, and the sinner could repent and be again received into the congregation, although the association of insobriety and crime did lead authorities to attempts to eradicate drunkenness through severe penalties, and to legal denunciations [pp. 357-9].

The enforcement of liquor legislation reflects the complex New England reactions to the problem of drunkenness. Laws dealt with morality, revenue, commercial regulation, price and product quality control, and the Indian trade. Wherever alcohol touched, the law

COMMENTARIES (Cont'd)

followed; virtually all modern legislation in this field was present in the 17th century. However, drunkenness laws were not applied with uniformity or consistency. Puritan selectmen did not apply the letter of the law at all times; justice was frequently tempered with compassion. This has been obscured by concentration on the harshness of Puritan justice [p. 361].

Tavern licensing policies provided other contrasts. Official views insisted that taverns exist as places of honest social intercourse and of good reputation, and intricate legislation was constructed, stating what they could sell, to whom, when and every other facet of the taverners' trade. By the 1680's, licenses were issued en masse, and New England had too many alcohol outlets to police adequately and any enforcement effort would have entailed a massive and constant drive, requiring more time, men, and money than the authorities could mobilize. Puritan officialdom never tried. In spite of official civil attitudes toward drunkenness and the consequent concern for the taverns, there was no uniform enforcement of regulations governing them. Practice did not always mirror the law, and enforcement was too great a task [pp. 362-4].

The Puritans, unlike later temperance reformers, seldom called liquor an evil. Prohibition was an innovation in the fight against drunkenness and was wrongly the control measure later most commonly associated with Puritanism. The Puritan efforts at controlling this social problem were taken out of context by the temperance reformers of later generations, and they were made the arch representatives of intolerance and excesses of temperance [pp. 364-5].

Liquor in colonial life -- Krout, Origins of Prohibition (1925), pp. 39-40.

"Whether spiritious liquor was of domestic or foreign origin, it penetrated deeply into the social life of Americans. Rum seemed to be ubiquitous. It was found in the finest tavern and the vilest road-house. The traveller seldom journeyed far enough to escape it, even in the mountains of the frontier. People of fortune kept a stock of good quality in their homes, while the servant and common labourer regarded it as indispensable. Parents gave it to children for many of the minor ills of childhood, and its wholesomeness for those in health, it appeared, was only surpassed by its healing properties in case of disease. No other element seemed capable of satisfying so many human needs. It contributed to the success of any festive occasion and it spirited those in sorrow and distress. It gave courage to the soldier, endurance to the traveller, foresight to the statesman, and inspiration to the preacher. It sustained the sailor and the plowman, the trader and the trapper. By it were lighted the fires of revelry and of devotion. Few doubted that it was a great boon to mankind.

"Along with milder liquors, rum served as a pleasing beverage for special occasions. No child was properly christened unless all present drank to the health and future prosperity of the infant. At weddings the tankards passed from hand to hand, and mugs or tumblers were frequently filled with punch, liberally seasoned with Jamaica spirits....The time-honoured practice of serving drinks to the mourners at a funeral was almost universally observed....Church as well as home festivities, were made the merrier by reason of the 'good creature.'...To the tavern also restored the town selectmen and the county justices that the business of government might have benefit of the clarifying influence of ardent spirits. There over a bowl of toddy or a mug of flip matters of local and colonial concern were decided, and civil and criminal cases were heard.

"In its intimate relation to the interests and activities of the community, the tavern was the most significant factor in the colonial liquor traffic. Though there was a vast difference in architectural form between the stately 'King's Arms' in Boston and the rude, wooden shack, which served as a public-house in the back country of North Carolina, both were symbols of an influence widely felt in eighteenth century America. They represented not only the performance of a public service for private profit, but also the strengthening of bonds of unity within and between communities. As centrally located as either the town-hall or the meeting-house, the tavern in New England served as a sort of community centre, housing in cases of emergency the worshipping congregation or the voters assembled for town-meeting."

Alcohol, Colonial America, 1606-1774

The extent of intemperance -- Krout, Origins of Prohibition (1925), pp. 26-27.

> "They [the colonials] seemed bent on indulging themselves more freely in the New World than in the Old, achieving in the process a reputation for unusual devotion to the flowing bowl. Their habits have been ascribed by their descendants to various circumstances; the hereditary influence of a hard-drinking Anglo-Saxon ancestry, the hardships and exposure of frontier life, the universal contemporary belief in the medicinal properties of alcohol and the ascetic character of Puritanism, which forced the individual to seek recreation and relief in the joys of the cup. Each explanation affords an opportunity for interesting speculation; but all are significant because they rest upon the hypotheses that excessive drinking was the rule rather than the exception during the colonial period.
>
> "Whether the hypothesis be true or not, the Puritan fathers seem to have convicted their own generation. In their opinion their fellows needed watching. Intemperance, resulting from flagrant abuse of nature's gifts, conflicted with Calvinistic ideas of frugality and respectability, which had it that liquor was given to man for the benefit of the group and not for the wasteful gratification of individual appetites. Therefore, by moral precept and statutory provision, the ban was placed upon drunkenness. He, who stepped over the shadowy line of moderation, was an outcast from the community. His pathway was in side streets and back alleys, lest his presence offend his more sober fellows. Summary punishment was his lot if he dared to parade his offence on the public highway. So insistent were the magistrates in their early attempts to suppress over-indulgence, that they succeeded in preserving for future generations an exaggerated idea, perhaps, of the extent of intemperance" (pp. 26-27).

The roots of American drinking patterns -- Bacon, Classic temperance movement of the U.S.A., Brit. J. Add. (1967), pp. 5-7.

> "Problems related to the use of beverage alcohol may be discovered almost throughout human history. However, for Western civilisation a rather marked change seems to have taken place between the fifteenth and seventeenth centuries. This development was related generally to the rather massive social and population changes then sweeping across Europe and was related very specifically to the appearance and rapid spread of distilled spirits. This innovation in beverage production increased by 400 or 500 per cent the alcoholic power of a given drink.
>
> "The new form of beverage quickly crossed the North Atlantic. In the colonies which were to become the United States of America, a variety of factors may be seen leading to the replacement of beers and wines, which had been the dominant alcoholic beverages of the colonists and their forebears, by distilled spirits. This change had taken place well before the formal emergence of the new nation in 1789. Among other developments, the following are generally accorded particular significance in producing this rapid change: (1) the inability of the colonists to find appropriate soils for viticulture; (2) extremely poor transportation facilities (roads, vehicles, animals) in a setting of vast land expanse with only small and widely dispersed villages, presenting a most uneconomic situation for the commercial distribution of beer, a product of great bulk consisting chiefly of water; (3) a restrictive British colonial policy on wine imports; (4) magnificent resources for developing cereal products; (5) the variety of factors which resulted in the notorious and vastly profitable 'Triangle Trade,' involving slaves in Africa, sugar cane in the West Indies, molasses and rum distillation in New England, a complex based on water-transportation. However, perhaps even more important than these directly economic forces which diminished the sales of wines and beers and enhanced the sales of distilled spirits, was the network of sociocultural changes involved in the emergence of a society under conditions so strikingly different from those of northwestern Europe: for example, the enormous amount of totally free and rich land, the remoteness or almost total absence of aristocracies, armies and governmental agencies of almost any type, the physical absence of traditional neighborhoods, long lived towns, long established parishes and churches, and, perhaps most significant, multi-generational families; the small proportion of older people; these and other factors led to a loosening of all manner of social controls."

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20

Alcohol
United States
1776-1865

BACKGROUND

The period between the Revolution and Civil Wars was one of great flux and change both in regard to American drinking patterns and American attitudes toward alcohol. By the end of the Revolutionary War the problem of alcohol consumption began to increase dramatically. The major alcoholic beverage had become distilled spirits, and drinking was becoming less a family affair and more an all-male, separate activity which was centered in the tavern and which had become an end to itself. Furthermore, the period 1790 to 1875, particularly 1800-1830, witnessed the heaviest drinking in American history. Consequently, concern over the abuse of the "Good Creature of God" also began to increase, at first principally among the New England elites. An organized temperance movement began to develop, and by the Civil War there was further established a prohibitionist school of thought which viewed all alcohol as evil.

In this regard, two points deserve emphasis. First, while the temperance movement can be seen as a natural response to the changing drinking patterns, the relationship between the two phenomena was not simply one of cause and effect. Indeed, the period in which the temperance movement began its greatest growth--the 1830's--was one in which consumption levels apparently began to decline (17). Both phenomena were also in part products of the same rapid social changes. Following the revolution, the old restraints on liquor lost their hold, a process that was intensified by westward migration, the decline of the old New England Federalist elites, the rise of Jeffersonian and Jacksonian democracy, and the growing influx of immigrants. In turn, the Federalist elite, as epitomized by Lyman Beecher, became concerned not only with the problem of drunkenness but with their decline in status and political authority and with the disintegration of their ideal of American life. In its inception, temperance reform became one of the primary, symbolic means through which they sought to maintain their vision of America, to arrest the change and reassert their values and position over society. This symbolic role of temperance reform would continue to play an important role in the spread of the movement's appeal into the American middle class after 1830.

Second, the temperance movement itself was characterized by a wide range of conflicting attitudes toward ends and means. It is important to distinguish between later prohibitionists and early temperance reformers. Early temperance reformers essentially espoused a policy of moderate drinking, favoring the use of beer and wine and extreme caution in the use of distilled spirits. Further they believed they could achieve voluntary abstinence or moderation through exhortation, reasoning, and moral persuasion, a school of thought Gusfield labels "assimilative reform." But around the 1830's, as movement grew and attracted more middle class participation, there developed a school of thought which called for abstinence from the use of all alcohol and, while not abandoning moral persuasion, sought to force compliance to abstinence through legislative activity, a "coercive reform" tradition. The history of the temperance movement in this period is essentially that of the conflict between the drys and the dry-wets and between those who advocated legislative activity and those who felt it should be avoided. Increasingly, however, the radical school of thought predominated, with the Marine law of 1850 inaugurating the country's first wave of state prohibition legislation.

CHRONOLOGY

1774-1776	CONCERN GROWS	First Continental Congress meets in 1774 and recommends that the "pernicious practice" of distilling grain be curbed (1:417). Anthony Benezet, a member of the Friends Society in Pennsylvania, writes a pamphlet entitled "The Mighty Destroyer Displayed in Some Account of the Dreadful Havoc Made by the Mistaken Use, as Well as the Abuse, of Distilled Spiritous Liquors." With the Declaration of Independence, first serious

CHRONOLOGY (Cont'd)

		and effective efforts against use of distilled liquors begins, particularly because of abuse within the army.
1781	USE INCREASES; MEDICAL CONCERNS	The surrender of Cornwallis on October 17, ends the American Revolution (peace signed, 1783). Following the war, controls on drunkenness weaken; consumption increases, as well as tolerance of excessive drinking. Fear grows among moral leaders that the American appetite for strong drink might well endanger the future of the country; in this period the American medical profession becomes deeply involved with the drinking problem. Medical concerns may be rooted less in increased consumption than in a rise in medical awareness (3:160).
1785	BENJAMIN RUSH	Benjamin Rush publishes his Inquiry into the Effects of Ardent Spirits on the Human Body and Mind, in which he calls the intemperate use of distilled spirits a "disease." Rush's Inquiry is possibly the single most important document in galvanizing the temperance movement (2:407).
1787	TAX URGED	Alexander Hamilton urges Congress to place a tax on distilled liquors, declaring "ardent spirits" under federal regulation might be made to furnish considerable revenue (5:57).
1789	IMPORT DUTIES; WESLEY & ABSTINENCE	The second act placed under the statute books of the U.S. Constitution is a bill providing for import duties on liquors and malt; John Wesley urges total abstinence, regardless of the circumstances.
1790	USE SPREADS	Consumption of distilled spirits and wine is estimated at 2.5 gallons per capita (5:52). Dr. Benjamin Rush persuades associates at the Philadelphia College of Physicians to send an appeal to Congress to impose heavy duties upon all distilled liquors to restrain their intemperate use (6:188). Between 1790 and 1830, Americans seem to go on an alcoholic binge (17:360).
1791	TAX ENACTED	Congress enacts Alexander Hamilton's program with the Revenue Act of 1791, which includes a tax on distilled spirits. In 1792, it is amended, increasing fees on distilleries and import of foreign materials for distillation.
1792	USE SPREADS	There are 2,579 distilleries in the United States producing 5,171,524 gallons of liquor. Another 4.5 million gallons of spirits, and 1.5 million gallons of wine are imported (5:54). This rate holds until about 1860, when it decreases, probably because of the Civil War (7:36).
1794	WHISKEY REBELLION	The first political-social problem over liquor in the United States arises when the Whiskey Rebellion takes place as a protest by farmers in Pennsylvania against the 1791-92 federal excise tax on liquor. The rebellion, put down forcefully by the federal government, marks the first test of Congress and the central government to enforce law within the states (7:36; 5:45). Later, the liquor duty is abolished by Thomas Jefferson (9:113).
1800+	JEFFERSON; USE INCREASES	Thomas Jefferson elected President (1800-1808); the period of heaviest drinking in American history begins. Grog shops proliferate, and the per capita consumption of distilled spirits begins to rise dramatically (17:360; 1:418).
	SOCIETAL CONDITIONS	The Jeffersonian, and later Jacksonian, political victories mark the rise of the influence of small farmers and artisans.

CHRONOLOGY (Cont'd)

		A drop in religious devotion occurs; the old norms of moderation become less effective as the Calvinist clergy loses its political and social positions as an elite. An increase in transient population, especially in the seaport cities, adds a familiar complex of urban crime, poverty, and drinking. The migration westward intensifies the erosive tendencies; liquor use spreads as pioneers try to cope with the hostile environment and to reduce their sense of isolation. The frontier dislodges the last barriers of intemperance (1:416). The Federalist-Calvinist elite of New England begin to worry about the spread of religious irreverence and the advance of democracy--the specter of the Godless drunken voter (8:83).
1810-26	TEMPERANCE SPREADS; CHURCH SUPPORT	Period of quickening temperance activities among churches, spurred on by a sweep of religious revivalism. An organized attack on the liquor problem begins, with backing from the Protestant religious establishment and the participation of "respectable" laity. Church members are urged not to take part in the traffic of distilled liquor. The church is no longer concerned with individual members only, but reaches out to influence public opinion outside the church communion and bring to bear the force of public opinion in behalf of temperance. The General Assembly of the Presbyterian Church focuses attention on the liquor traffic; Lyman Beecher, a Calvinist clergyman and pupil of Anthony Benezet, establishes a temperance movement in Litchfield, Connecticut, seeking to reduce liquor consumption through voluntary associations (5:67-69; 2:406; 10:939-957).
1813	LYMAN BEECHER	Lyman Beecher founds the Connecticut Society for the Reformation of Morals, which seeks to change morals not by legislation but by good example. Although temperance is an integral part of this moral reform, it is still not a separate movement (10:949).
1825	ABSTINENCE URGED	A more direct attack is launched, calling for abstinence not just temperance. Lyman Beecher (Six Sermons on Intemperance) declares there is no such thing as prudent use of liquor, a sin which destroys health and intellect and works to render ineffectual the means of grace and brings upon the souls of men everlasting destruction. He lists the physical and spiritual symptoms of intemperance. Knowing the legislation will have to wait, he tries to create the moral sentiment to prepare the way for it (10:945, 951-3).
1826	ATS FOUNDED	The American Society for the Promotion of Temperance (ATS), "the crystallization of sober sentiment," is founded in New England (1:417). Through this society, the northern elite still try to preserve the old order and reestablish their control over the increasingly powerful middle classes, but efforts now take on a more general character (11:36). Efforts are still directed toward mild criticism rather than bitter invective against nonabstainers; remains a period of optimism in which it is believed temperance will become so popular it will effect a voluntary revolution in manner and morals (8:125-6).
1828-36	JACKSON	Andrew Jackson's presidency marks a further defeat of the old elites in the face of the rising American "common man."

CHRONOLOGY (Cont'd)

1830's-50's	REFORM SPREADS; SHIFT TO ABSTINNENCE BEGINS	Temperance organizations and doctrines begin to attract new adherents from among the "common" people as the movement begins to reflect the methods of revivalism. A decline of aristocratic leadership occurs; total abstinence begins to become the primary doctrine of the movement, and more attention is placed on legislative reform (11:46-51, 68-9). By 1832 the membership of ATS rises to 500,000, and temperance societies have been established in all but three states (8:128-9).
	USE DECREASES	In the South and the West, to decline a drink is still often considered a serious social offense (1:420-1), but after 1830, whisky and cider consumption plummet, leading to a low of 1 gallon of absolute alcohol per capita. The temperance crusade, improved transportation, improved economy, and a new industrial ethic all influence this decrease (17:362).
1833	CONVENTION	First national temperance convention.
1834	MILITARY REFORM	Due to increasing pressure on the military by temperance crusaders and physicians, the whiskey ration in the army is terminated (2:410-11).
1837	DRINKING PATTERNS	An English naval officer, Frederic Marryat (A Diary in America, 1837:388-389), observes: "They say that the English cannot settle anything without a dinner. I am sure the Americans can fix nothing without a drink. If you meet you drink, if you part you drink, if you make an acquisition you drink. They quarrel in the drink, and they make up with a drink" (1:419).
1840	WASHINGTONIAN MOVEMENT	The Washingtonian Temperance Society, the first self-reform abstinence movement to bring about large-scale rehabilitation of alcoholics, is founded. By 1842 the movement has penetrated into every major area of the country, with decline setting in by 1844 (19; 8:182 ff.).
1840's	IMMIGRATION: BEER USE INCREASES	Beer consumption begins to rise as German and Central European immigrants arrive in America: 1850, 2.17 gallons per capita; 1860, 5.30 gallons; 1870, 8.73 gallons; 1871-1880, 11.26 gallons; and 1881-1890, 17.94 gallons (12:4).
	TEMPERANCE APPEAL SPREADS	The temperance movement attracts urban, nativist, Protestant Americans seeking to consolidate their middle class respectability through a sharpened distinction between the native middle class lifestyle and those of the immigrants and marginal laborers or farmers. These groups are also attracted to the new revivalist methods of the movement and many join in an alliance with the antialien Know-Nothing movement (11:36, 49, 55; 13:91-3).
1841-89	TREATMENT	Special institutions begin to develop to deal with problem drinkers, especially in New England and New York, and organized formal study into the effects of alcohol is conducted (14:67; 15:823).
1843	PROHIBITION ATTEMPTED	The first prohibition law in the U.S. is passed in Oregon Territory, but is repealed in 1848.

CHRONOLOGY Cont'd)

1851-65	FIRST PROHIBITION LAWS	The first wave of prohibition laws is enacted, starting with Maine in 1851. By 1855, 13 states have such laws, but by 1863, 8 have repealed them, and 4 have modified them (1:418). Prohibition campaigns are set up in practically every state, marking the beginning of the shift from assimilative reform seeking to convert norms violators to coercive reform seeking to force compliance (11:62-85). These laws crystallize the new philosophy of social reform by political action, as opposed to one of regulation and persuasion. Prohibition begins to become a partisan political issue; prohibition sentiments and party loyalties are often split (5:140).
1852	WOMEN'S MOVEMENT	Susan B. Anthony establishes the Woman's State Temperance Society of New York, the first such society formed for and by women. Many early feminists are prohibitionists (13:92).
1860	USE LEVELS	Per capita (15 years and older) consumption of distilled spirits continues to decline; beer use increases (17:361).
1862	REVENUE ACT	To help fund the Civil War, an Internal Revenue Act imposes a license fee of $20 on retail liquor dealers, a fee of $1 per barrel on beer; and $.20 per gallon on spirits. As a result, a financially and politically powerful liquor interest develops which continues after the war (5:139; 13:92). However, as the tax increases, revenues do not, as fraud, stockpiling, and tax evasion increase (20:501).
1865	PROHIBITION LAWS REPEALED	First wave of prohibition laws ends in failure, undercut by the effects of partisan politics, the Civil War, and the Internal Revenue Act (5:139-40).

COMMENTARIES

Benjamin Rush and post-revolution alcohol consumption -- Cherrington, Evolution of Prohibition (1920), pp. 40-41.

> "Doctor Rush frequently has been referred to by historians as the pioneer advocate of total abstinence from the use of alcoholic liquors. As a matter of fact, however, his activities and writings were limited to the fight against distilled liquors. This was quite in harmony with the general attitude toward the question in that early day, since even those who were the strongest advocates of temperance seemingly had no thought of placing under the ban such intoxicants as beer and light wine. It is not unlikely that this attitude upon the part even of religious forces and temperance reformers may have been due in part to the fact that the consumption of beer and wine during that period was very small. Distilled liquors, which constituted the principal intoxicant, were consumed at the rate of about two and one-half gallons per capita annually. From these and other facts it is evident that the liquor problem had not assumed anything like the comparative proportions it did in later years when the liquor interests and more especially the beer interests began active propaganda to promote the use of béer as a beverage and thus strongly appealed both to appetite and greed."

America's alcoholic binge -- Winkler, Drinking on the American Frontier, Q.J. Stud. Alc. (1968), pp. 418-421; 441-442.

> Apparently American drinking was heaviest during the first three quarters of the 19th century. General conclusions established statistically are confirmed by other more subjective sources. Travelers, missionaries, and even forty-niners commented on the grossness of American drinking in the 19th century, while comparable material indicates no such excesses

COMMENTARIES (Cont'd)

in either the preceding or succeeding centuries. Most observers noticed the ubiquitous presence of liquor. Whiskey was used so widely and frequently that it became an expected part of all social intercourse. Many Americans were in the habit of drinking throughout the day, from dawn to dusk. Some liked an alcoholic "sling" as soon as they rose each day, and in the South, especially, men took off from work in mid-morning for "eleveners"--their version of a coffee-break--where they drank a mixture of whiskey and berry flavorings.

Despite their descriptions of widespread drinking, most observers felt that there was little bawdy drunkenness in the more settled areas of the country. In America there seemed to be less "absolute inebriety" than in any country in Europe. Eliot Warburton, an Englishman hostile to most democratic institutions, noted in 1844 that Americans were very prone to drink in spite of the temperance movement, but then, he reflected, they were "not very prone to get drunk." Evidently they had learned how much they could drink and when to stop. One important consideration, however, is that people were indulging and their observers were writing at a time when extensive drinking was more acceptable than it is today. From a present-day perspective, Americans of the past might be described as intoxicated, but during the 19th century their condition was not considered a social liability because they could continue to function in their daily tasks. There were the usual drunkards, but most people managed to get well lubricated without jeopardizing their ability to conduct themselves respectfully.

Those commentators who traveled throughout the country remarked that drinking was even more intemperate in the western regions, where cheap whisky was the most popular beverage--and the visitors generally avoided the primitive groups which drank to excess. Most of their comments referred to the more moderate settlers whose habits still proved to be less restrained than those of the East. While the pioneer farmers drank liberally, it was the adventurers preceding them who gave the West its reputation for excessive drinking.

Americans throughout the country enjoyed their liquor during the 1800s, and drunkenness was more common than it had been in colonial days. Yet people still managed to avoid frequent intoxication because society frowned on this kind of behavior. Once they headed West, however, the societal restrictions and limitations on explosive conduct were easily forgotten. In the crude surroundings, men drank heavily to ease the loneliness and frustration they felt. Despite the efforts of the temperance movement, heavy drinking continued until an area was fairly thickly settled and men began to interact intimately with one another again. Only when men no longer had to struggle for a self-sufficient existence was there much hope of reforming their habits. Only when a region was no longer part of the uncivilized frontier was excessive drinking finally checked.

Alcohol consumption before and after 1830 -- Rorabaugh, Estimated U.S. alcoholic beverage consumption, 1790-1860, J. Stud. Alc. (1976), pp. 361-362.

"Between 1790 and 1830 Americans seem to have indulged in a veritable alcoholic binge. Several elements contributed to this phenomenon. At that time Americans retained a belief that liquor was healthful, nutritious, stimulating and relaxing. This predisposition to drink meshed with a rising abundance of cheap whisky as settlers planted fertile grain lands in the Midwest. Amid a grain glut, the price of whisky fell to 25¢ a gallon, less than wine, beer, coffee, tea or milk. Then, too, the preference for strong drink reflected the need to wash down poorly cooked, greasy, salty and sometimes rancid food. Americans, however, also drank to enjoy the effect. Intoxication met certain psychological and social needs prevalent in a period of economic turmoil and social dislocation.

"After 1830 whisky and cider consumption plummeted, leading to an intake as low as 1 gallon of absolute alcohol per capita in 1850. Much of the decline occurred abruptly during the 1830's, when temperance crusaders persuaded many to redirect the impulses which had spurred drinking into religious channels. This movement was assisted by improved transportation, which opened new markets for surplus corn, by rising economic opportunity which encouraged Americans to accumulate capital rather than spend money on liquor, and by the adoption of an industrial ethic, which stressed efficiency, order and production, values antithetical to much drinking."

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COMMENTARIES (Cont'd)

The Whiskey Rebellion -- Cherrington, Evolution of Prohibition (1920), p. 45.

> "The Whiskey Rebellion not only presented the problems of states' rights in general, but it presented in particular the question which involved the possibility of solving the liquor problem under the American form of government. From that time on it was evident that the liquor problem in the United States could never be permanently solved except by national action and that before the problem could be put in the way of permanent solution the states' rights doctrine, which had already asserted itself both in the North and in the South, would have to be settled, as it was settled seventy-five years later."

Temperance and Christianity -- Cherrington, Evolution of Prohibition (1920), p. 92.

> "Had the temperance reform in America waited for a non-church or a non-Christian leadership, the temperance revolution of the past century would yet remain to be accomplished. No close student of the philosophy of history during the nineteenth century and the first twenty years of the twentieth century could reasonably arrive at any other conclusion than that the motive, the genius and dynamic force of the temperance reform, regardless of whatever form it may have assumed or through whatever particular organizations it may have expressed itself, nevertheless has been the product of the Christian church."

The failure of the first prohibition wave -- Cherrington, Evolution of Prohibition (1920), pp. 139-140.

> "The failure of state-wide Prohibition in most of these states and the lack of stability and permanency in the Prohibition movement, which had promised so much between the years of 1851 and 1856, was due to many causes, several of which stand out in bold relief. In the first place, just at the time when Prohibition activity and Prohibition legislation was at its height, the attention of the moral reform forces of the nation was turned to the slavery question, which reached its crisis in the war of 1861-1865. The general demoralizing effect of the war itself upon most questions of public morality was also a significant factor in turning the tide which had been running so strongly in the direction of temperance reform. The internal revenue plan which was adopted as a war measure but which indirectly turned over the policy of the government on the liquor question to the dictation of financially and politically powerful liquor interests which promptly sprang into existence as a direct result of that policy, was one of the very strongest factors in saddling the liquor traffic on the nation for long years after the war.
>
> "Another factor which was undoubtedly responsible to a considerable degree for wrecking the Prohibition movement and causing the prompt repeal of prohibitory laws that had been enacted in the several states, was the partisan political turn which the Prohibition movement took in the fifties. In most of the states, in fact, the question of Prohibition became a party issue, being championed by one political party and opposed by another, thus dividing to a great degree those whose sympathies were in favor of Prohibition but whose allegiance to party ties and whose party loyalty in those stirring times was regarded as a virtue of more importance even than their temperance proclivities."

Social status and the temperance movement -- Gusfield, Symbolic Crusade (1963), pp. 3-11.

> In its earliest development, temperance was one way in which a declining social elite tried to retain some of its social power and leadership. The New England Federalist "aristocracy" was alarmed by the political defeats of the early 19th century and by the decreased deference shown in their clergy. The rural farmer, the evangelical Protestant, and the uneducated middle class were a rising social group who rejected the social status, and the political power, of the Federalist leadership. The men who founded the temperance movement sought to make Americans into a clean, sober, godly, and decorous people whose aspirations and style of living would reflect the moral leadership of New England Federalism. If they could not control the politics, they might control the morals.
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> The temperance movement was a reflection of clashes and conflicts between rival social systems, cultures, and status groups. As the temperance adherent's own claim to social respect and honor were diminished, the sober, abstaining citizen sought for acts through which he

COMMENTARIES (Cont'd)

might reaffirm the dominance and prestige of his lifestyle. Converting the sinner to virtue was one way; the law was another. Even if the law was not enforced or enforceable, the symbolic import of its passage was important to the reformer.

Later, temperance legislation was seen as one means of impressing upon the immigrant the central power and dominance of native American Protestant morality. Curtailment of alcohol sales was a way of solving the problems presented by immigrant, urban poor whose culture clashed with American Protestantism. The urban, progressivist impulse in temperance reflected the fears of an older, established social group at the sight of rising industrialism."

Forces behind the American prohibition movement -- Krout, Origins of Prohibition (1925), pp. 297-299; 299-304.

"One cannot study the growth of temperance sentiment in the United States and escape the conclusion that the Eighteenth Amendment was long on its way. Its ratification was not the result of temporary conditions taken at their flood, but the final expression of a fundamental change which had been more than a century in the making. This formative movement, now revealing itself in the guise of prohibition, reaches back beyond any efforts to amend the Constitution; it took its rise from early attempts to curb the intemperate use of intoxicants. It was not a simple movement. Many factors, at times apparently working at cross purposes, determined its varying course and ultimate goal. Its ranks were swelled by recruits from every walk of life, representing an infinite variety of ideas and ideals. The wide range of its propaganda was a fair indication of the multitude of motives which inspired those who laboured for its success.

"It is obviously futile to regard any or all of these motives as a complete explanation of the present state of affairs, for some new forces entered the prohibitory movement after Neal Dow won his first victory in Maine. No true appreciation of these later developments is possible, however, without an understanding of the early reform....In the first place, they were convinced that their cause was truly American, that it squared with American ideas and institutions, that it was growth of the soil....

"Temperance reformers who saw their cause in this light were prone to emphasize its affiliation with other American efforts to establish a more perfect social order. The people of the United States were testing out new theories regarding the individual's relation to the group. Extreme individualism, so characteristic of the young and growing nation, was being modified by a keener realization of society's responsibility for those unfortunates who had lost out in life's struggle....Many temperance enthusiasts, therefore, felt that their idea was basic. Stressing the principle of self-denial, abstinence not only freed men from slavish subjection to appetite, but it prepared them through the purifying influence of this asceticism for greater cooperation with their fellows" (pp. 297-299).

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There was also in the temperance philosophy a strong conviction that the reform was typically American in its defense of the home and that it had bearing upon the great experiment being made in democratic control. If democracy was to succeed, the American voter would have to be safeguarded on every side, even from the folly of his own vices. But both opponents and supporters agreed that the greatest single force in the movement was the power of evangelical Protestantism. Here again, there seemed to be something distinctly American about the situation. It was a matter of grave concern to the New England Puritan that his neighbor's manners and morals should be acceptable unto God. Though the explanation of the fact may escape us, it is true that American evangelical Protestants, whether Calvinists or not, were far more inquisitorial and censorious than their European brethren. This was early appreciated by temperance propagandists and they made the most of it. The reform was given a religious significance which placed it on the plane of things spiritual.

Not all of the reformers thus idealized the movement. For an ever-increasing number the chief concern was not the suffering and cruelty which drink caused, or the souls which it sent to perdition, but the economic waste it involved. The industrial enterpriser was beginning to see in the liquor business a potential menace, a menace not at all lessened by the constant infiltration of foreigners into the United States.

COMMENTARIES (Cont'd)

Even if the foregoing theories are accepted as explanation of the movement for total abstinence, there still remains the question of why prohibitory laws became the approved method of solving the problems connected with intemperance. During the first four decades of the 19th century, temperance advocates generally refused to consider restrictive legislation as a proper means of effecting their object, believing in man's perfectibility. Through the instrumentality of voluntary associations, they carried their propaganda into the American home. Each achievement meant a challenge to greater effort. From moderation they moved forward to abstinence from ardent spirits, and then to total abstinence from all that could intoxicate. But while their cause was growing in popularity all the while, it was not progressing rapidly enough for the most impatient ones. By 1840, they were convinced that the lure of profits to be gained from the liquor traffic was nullifying their efforts.

As population increased, the problem grew ever larger. Years of experience in reasoning with individuals and groups were wearing down faith in the efficacy of persuasion alone. Face to face with a proposition too big for individual initiative, they turned to the government. In the Maine Law of 1851, they won their first important victory. It indicated that the major portion of the temperance forces would follow their leaders into the prohibitory movement, and it forecast some of the tactics and methods of future campaigns [pp. 299-304].

Changes in the American temperance movement, 1836-1850 -- McCarthy and Douglas, Alcohol and Social Responsibility, (1949) pp. 22-24.

"The interval from 1836 to 1850 was a transition period in the history of American temperance activity. Ideas emerged which broadened the base on which the temperance pledge rested and caused a shift in the philosophy of the entire movement. The concept of total abstinence from all that can intoxicate became established, though not without considerable opposition....

"The inclusion of all alcoholic beverages in the temperance pledge was a radical step. It involved rejection of the teachings of Dr. Benjamin Rush, who had recommended beer and wine as a means of reducing intemperance. It challenged the opinions of certain leaders of the temperance movement a generation earlier, including those of the Reverend Lyman Beecher....

"It was at this time that many temperance leaders began to exhibit doubt concerning the effectiveness of moral suasion in dealing with the problem. The principal of teaching by example appeared to them to be inadequate. In 1830 the American Temperance Society had declared itself opposed to any attempt to legislate on matters of temperance, holding that a direct appeal to the moral sense of the people was more in keeping with Christian principals. Within a few years, however, sentiment had changed. The leaders complained not only that the laws under the license system were inadequately enforced but that the public sale of intoxicants constituted an immoral offense which the government ought not to sanction.... The year 1838 was known as the petition year because of the number of petitions presented to state legislatures urging changes in licensing laws...."

"In spite of continued opposition by conservatives within the temperance movement, a basic shift in the philosophy of the movement took place. The concept of total abstinence from all alcoholic beverages as a moral principle sanctioned in Scripture became the cornerstone of the temperance movement, and an aggressive policy of seeking legislation to support the moral issue in the public interest was adopted as a corollary. This was to culminate in the movement for national prohibition."

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Alcohol
United States
1869-1933

BACKGROUND

By the time of the Civil War, a coercive, prohibitionist tradition had been established within the American temperance movement; in the years following, the tradition continued to gather strength, culminating with a third wave of state prohibition laws beginning in 1906 and the establishment of national Prohibition in 1920. The growth of the prohibition movement and the failure of national Prohibition have greatly affected the American response to drug use and to all subsequent attempts at its control. Their causes, meaning, and significance are still much debated. To many, Prohibition is an example of the futility of restrictive legislation against any drug use; others lament that a reaction to a unique and unfortunate experience has since prevented the development of any effective program for the control of alcohol use; still others contend Prohibition was never really attempted. The roots, weaknesses, and effects of Prohibition must be studied carefully if this experience is to have any utility for us today.

In part, Prohibition occurred because abstinence had become symbolic of a style of American life--Protestant, middle class, nativist, and largely rural--at a time when that lifestyle appeared threatened by increasing modernization, urbanization, industrialization, and immigration. The use of alcohol as a means of identifying social class membership and defining an entire world view persisted; the symbolic role of temperance remained constant throughout the movement's history. But the movement also continued to undergo significant changes and internal conflicts during this period; and while in retrospect the coming of national Prohibition appears neither accidental nor inexplicable, it is also clear that its success lay in a number of complex and to a certain extent unique factors.

Among the major developments which occurred there was a general broadening of the focus of the prohibitionists from a concern with state and local legislation to an emphasis on national legislation. In 1870 the first national prohibition law was introduced into Congress and in 1869 the Prohibition Party was formed to compete in partisan political elections. A related change was increasing organization as well as coercion. The failure of the Prohibition Party's partisan effort led to the rise of the Anti-Saloon League (ASL), which was more tightly organized, supported the election of dry candidates from all parties, and put heavy political pressure on elected legislatures. There is little doubt that the organization and tactics of the ASL contributed significantly to the passage of the 18th Amendment.

Another major debate of this period centered around the extent to which the temperance movement should support wider socioeconomic reform efforts. The history of prohibition cannot be divorced from the contemporary Populist and Progressive reform movements. The early Prohibition Party and the WCTU under the formidable Frances Willard believed prohibition was the inevitable next step in the progressive betterment of American society in general and viewed abstinence as part and parcel, albeit the most critical part, of a general effort to reform society. Others advocated that the movement should focus solely on the issue of alcohol use, a philosophy which became the keystone of the Anti-Saloon League and finally came to predominate.

The commentaries below explore in more depth some of the reasons that have been suggested for the passage of national Prohibition, including the spread of its appeal to middle class, urban Americans, its relationship to the Populist and Progressive reform movements, the role of business and the new industrial work ethic on attitudes toward drinking, the variability in church support, the antagonism toward the saloon itself, and the impact of World War I. Also discussed are the reasons for the failure of Prohibition and the legacy of the movement.

CHRONOLOGY

1869	PROHIBITION PARTY	The Prohibition Party is formed marking a new effort of partisan political activity (1:83). The Party aims for widespread social reform.
1870	USE PATTERNS CHANGE: TAXATION	Consumption of distilled liquor continues to decline, and beer consumption continues to increase. It is estimated one saloon for every 200 Americans (1:93). Between 1870 and 1915, the tax on liquor provides from one-half to one-third of the whole of the internal revenue of the United States, amounting to about $200 million annually after the turn of the century.
1870	CHURCH INVOLVEMENT	Prohibitionists begin to rely not only on scriptural authority but also on secular arguments based on drink's moral and physical effects on society and the individual. In turn, organized Protestant churches begin to disengage themselves from direct participation in the movement while still supporting temperance in general (21:82-3).
1874	WCTU	The Women's Christian Temperance Union is founded in Cleveland, marking the formal entrance of women and the feminist movement into the temperance movement (11:501). In the old assimilationist tradition, the WCTU places most of its emphasis on educational efforts (1:46).
1876	PROHIBITION AMENDMENT	The first prohibition amendment to the U.S. Constitution is introducted into Congress.
1879	FRANCES WILLARD	Frances Willard is elected leader of the WCTU; until her death in 1898 she is one of the most influential women in American politics (21:29 ff). Called "the Uncrowned Queen of American Womanhood," Willard declares that temperance would bridge the gap between the sexes and expands the consciousness of the movement to incorporate wide social reform: "We believe in a living wage; in an 8-hour day; in courts of conciliation and arbitration, in justice as opposed to greed in gain" (12:76)
1880's-90's	SOCIAL DISCONTENT	Increasing discontent grows among rural and middle class native Americans over rapid urban industrial growth and increased immigration. American farmers begin to feel a loss of status, power, and income, and Populism emerges partly as an attempt to preserve the old order of rural dominance and to rectify socioeconomic inequalities throughout the country.
	2ND PROHIBITION WAVE	A second wave of state prohibition laws occurs, most of which are repealed by 1904. Again, lack of organization is blamed as a principal cause of this failure. Increasingly, prohibitionists are placing emphasis on the psychological fears of the nation (1:46).
1882	EDUCATION LAWS; ANTI-PROHIBITION MOVEMENT	Led by Frances Willard, the WCTU develops the most comprehensive educational program for abstinence and prohibition in the U.S. for the first time in world history. A law is enacted requiring temperance education in public schools. By 1900, all states have similar laws. The Personal Liberty League is founded to oppose movements for compulsory abstinence from alcohol (3:114).

CHRONOLOGY (Cont'd)

1888	PARTY FAILURE	The election of 1888 reveals the failure of the Prohibition Party's attempt at partisan politics and at supplanting the Republicans as the standard bearers of reform; its appeal is spreading less then ever before (21:44).
1890's	CARRY NATION	Carry Nation begins her campaign of hatcheting saloons.
1892	POPULISTS	The Populists rise as the most aggressive third party, undercutting the support for the Prohibition Party, which begins to become more conservative and more narrowly focused solely on the issue of alcohol (21:69 ff). Political friction grows between the countryside and city (1:85; 4:60).
1893-95	ANTI-SALOON LEAGUE	The Anti-Saloon League is founded because of the failure of the Prohibition Party and its attempt at partisan politics, and because of the previous inefficiency of a multitude of temperance organizations working separately. The ASL concentrates solely on the election of drys in state legislatures and the establishment of state programs (2:78 ff). The League becomes the most highly organized and influential non-partisan body striving for prohibition, drawing on the support of churches as never before (21:82 ff; 2). Calling itself "Protestant church in action," the ASL concentrates solely on cause of temperance and unlike the Prohibition Party, refrains from dabbing in other reform (12:108).
c. 1900	CHURCH INFLUENCE	Evangelical Protestant churches begin to more openly support the prohibition movement through the ASL. The churches become an arm of the temperance movement and the movement becomes a rallying point among church members (5:409; 21:82-84).
	INDUSTRY SUPPORT	Industry and labor begin to take an active role in encouraging temperance, believing the saloon was often responsible for industrial injuries and absenteeism. Various methods are adopted to promote sobriety, including lectures, literature and job references for teetotalers (6:67-79). The ASL declares that liquor was not only the enemy of the home but also the enemy of the working man and that the saloon is "the great sinkhold for the workers' wages" (2:53).
	PRICE CONTROLS	A change occurs in price-control ideology. The original objective of price controls was to prevent overcharging rather than overdrinking and to secure revenue for the government. With the rise of the temperance movement, heavy taxation becomes justified as an effective way to promote sobriety and protect health, morals and the stability of society.
1901-1914	PROGRESSIVISM	Era of Progressive Reform. The politically articulate middle class sets out to utilize the government to change or neutralize the habits of large groups by well-written legislation and honest enforcement; an organized political effort begins on every level of government to use legislation to achieve more reform (4; 5; 6; 7:66).
1905	INTERNATIONAL CAMPAIGN	Senator Henry W. Blair calls for an international prohibition movement, including all poisonous substances which create or excite "unnatural appetites."
1906	ASL ACTIVITY	The Anti-Saloon League establishes greater independence from the other reform movements and increases its activities.

CHRONOLOGY (Cont'd)

1907-17	3RD PROHIBITION WAVE	In the decade before World War I, a third wave of state prohibitory legislation occurs, primarily in the South and West. By 1917, 25 states have some kind of prohibitory laws. However by 1913, statewide prohibition begins to loose popular momentum. Four out of six states which go dry during 1907-09 do so by legislative action. In contrast, in 1909-13, eight states reject prohibition by referendum votes (21:216)
1913	WEBB-KENYON LAW	ASL launches campaign for national prohibition. In its first major triumph, Congress passes the Webb-Kenyon law forbidding liquor being brought into states in violation of restrictive legislation (1:154). Lack of federal enforcement renders the statute virtually meaningless (11:505).
1914	EFFECTS OF WORLD WAR I: HOBSON RESOLUTION	World War I breaks out in Europe, releasing nativist fears and patriotism in the U.S.; this helps set the stage for prohibition by increasing intolerance throughout the nation. Congressman Richard Hobson of Alabama, in alliance with the WCTU and the Anti-Saloon League, urges a prohibition amendment to the Constitution. The ASL steps up its efforts to support the election of drys in both parties as the only way to obtain prohibition (1:23, 63).
1915	PRESSURE MOUNTS: HOBSON DEFEATED	U.S. launches its Preparedness Campaign in case of entry into the war; campaigns to promote national efficiency by ending alcoholic consumption increase (6:164). The number of states turning dry mounts, but in December Hobson's Resolution is rejected.
1916		Drys gain major victories in the national elections. The U.S. Pharmacopoeia drops whiskey and brandy from its standard list of drugs.
1917, April	HOBSON RESOUTION REINTRODUCED	The U.S. enters World War I; war hysteria and fears mount, helping to engender the final support necessary for the passage of prohibition (1:116-126). The Anti-Saloon League begins a new campaign for the 18th Amendment, presenting prohibition as "first and foremost a patriotic program to win the war" (1:116-26). An amended Hobson Resolution is reintroduced into Congress.
	LOCAL PROHIBITION	By the same month, 26 states have enforced prohibition, incorporating over half the population of the nation. Most of these states are in the West, and mostly in areas where reform movements for business regulation, woman suffrage, direct primaries, initiative and referendums, and ballot reform are strongest (6:166).
1917, May	MILITARY BANS	Dry zones are established around every military camp; and the use by or sale to the military is completely forbidden (6:174).
1917, Dec.	HOBSON RESOLUTION PASSED	The Hobson Resolution (proposed as the 18th Amendment to the Constitution) passes Congress. The amendment calls for prohibition of manufacture, sale, transportation, or importation of intoxicating liquors--but does not forbid its purchase or use. No penalties for violators are specified; Congress is simply empowered to enforce the article by appropriate legislation. The amendment is sent to the states for ratification.

CHRONOLOGY (Cont'd)

1918	WAR PROHIBITION	The Anti-Saloon League calls the liquor traffic un-American, pro-German, crime-producing, food-wasting, youth-corrupting, home-wrecking and treasonable. In November, the War Prohibition Act is passed, forbidding the manufacture of beer and wine and outlawing the sale of all intoxicating beverages (1:121; 6:179-80; 24:334-5; 2:72).
1919	18TH AMENDMENT RATIFIED	By January 16th, the 18th Amendment is ratified by the necessary 36 states, and becomes effective one year later.
	WAR ENDS: RED SCARE	In November, Armistice is declared in Europe, and in June the Versailles Peace Treaty is signed. In October, Attorney General A. Mitchell Palmer organizes his raids on alleged foreign radical organizations, and a Red Scare sweeps the nation.
	VOLSTEAD ACT	In October, Congress passes the National Prohibition Act or Volstead Act over a presidential veto in order to give effect to the new constitutional amendment. The act prolongs wartime prohibition and sets penalties for violations. A compromise between wets and drys, it aims to secure as much enforcement of prohibition as the country can endure, but not total enforcement. Penalties for bootlegging range from $1,000 and six months in jail to $10,000 and five years in jail; places selling liquor illegally can be padlocked for a year; and personal property used in trafficking can be seized and sold. The purchase of liquor, however, does not make the purchaser liable for prosecution under the law of conspiracy. Only doctors can legally issue their patients whiskey, brandy, and other strong drinks.
1920	PROHIBITION BEGINS	On January 16th, National Prohibition begins but no serious effort is made to enforce prohibition until the 1930s (1:168-9, 183). Within six months, five major sources of illicit liquor had developed: medicinal, illegal beer, smuggled liquor, industrial alcohol and illicit stills (23:64 ff.).
c. 1921-22	USE DECREASES	Consumption and alcohol problems are lowest yet achieved in any period for which data are available (9:26-72, 172-92).
1923-24	ILLEGAL TRADE; USE INCREASES	Supplies of legal liquor existing in 1920 begin to dry up and an increasing flow of illicit liquor enters the scene; rumrunners, often under foreign flags, bring liquor into the country from Belgium and Holland. In 1923, there are 134 seizures of such vessels; in 1924, 236 seizures. As of 1924, $40 million of liquor is entering the U.S. annually (11:506). Convictions for violations become difficult to achieve and enforcement meets resistance even among officials (10:378).
1925		Illegal liquor trade becomes well established; speakeasies and other clandestine outlets make their appearance and consumption increases substantially (9:27-73). The total number of illicit distilleries, stills, still worms, and fermenters seized in 1925 rises to 172,527 compared to 95,533 in 1921 (11:505.)
1927-30	PRICES INCREASE	During this period, consumption of beverage alcohol equals 2/3 that of 1911 and 1914; however, the amount of money spent on bootleg liquor is exactly the same for both periods (9:108).

CHRONOLOGY (Cont'd)

	DEATHS	By 1929, about 1 out of every 10 gallons of denatured alcohol is diverted into bootleg liquor; about 40 Americans per million die each year from drinking illegal alcohol as a result of wood alcohol poisoning (1:201).
1928	DOCTORS' PRESCRIPTIONS INCREASE	Over 15,000 doctors and 57,000 druggists and drug manufacturers apply for licenses to prescribe and sell liquor within 6 months after passage of the Volstead Act; by 1928, doctors are making an estimated $40,000,000 per year on writing prescriptions for whiskey (1:61, 140).
		In 1928, the wealthy DuPont family abandons the drys, followed in 1932 by John D. Rockefeller and S.S. Kresge. Their conversion is effected by the strong influence of the income tax--if liquor is taxed, they reason, both personal and corporate income can be abolished (12:128; 19:22).
1929	HOOVER	Herbert Hoover becomes president and seeks to solve the problem of prohibition by appealing for willing compliance by law-abiding citizens (23:245).
1930's	PROHIBITION CRITICIZED; DEPRESSION	Enforcement efforts and penalties are increased, but still with little effect. The Great Depression helps kill support for the 18th Amendment; Democrats argue prohibition is hurting the economy by increasing unemployment and depriving the government of tax revenue (12:127).
1930	SEIZURES	282,122 illicit distilleries, stills and fermenters are seized, an increase of c. 100,000 over 1925 (11:505).
1931	WICKERSHAM COMMISSION	The Wickersham Commission (National Commission on Enforcement of the Prohibition Laws) observes that the passage of the 18th Amendment was attributable not to public opposition to use of intoxicating beverages but rather to public hostility toward excessive consumption, political corruption, and licensed saloons. Acknowledging widespread flouting of Prohibition and the lack of adequate enforcement machinery or funds, the commission as a whole opposes repeal or even modification to permit the sale of light wines and beer (25; 23:255).
	REPEAL SENTIMENT	The high point of sentiment for repeal (10:39).
1932	CONVICTIONS INCREASE	Convictions for liquor offenses rise from 35,000 a year after 1922 to 61,383 in 1932. Jail sentences rise from 11,818 in 1927 to 44,678 in 1932 (1:190).
	POLITICAL CONVENTIONS OPPOSE PROHIBITION	Both the Democratic and Republican political conventions decide to oppose Prohibition; the Republicans ask for resubmission of the 18th Amendment to the states, and the Democrats demand outright repeal (1:386).
1933	PROHIBITION REPEALED	With the election of the Democratic candidate for President, Franklin D. Roosevelt, Prohibition is repealed by passage of the 21st Amendment. This marks the rise of a new urban, middle class professional elite.

COMMENTARIES

Interpretations -- Blocker, Retreat from Reform (1974), p. 4-5).

"Interest in the prohibition movement has passed through two phases since repeal of the Eighteenth Amendment in 1933. During the first phase, which might be considered an ex post facto attempt to justify repeal, prohibitionists were studied because of their freakiness, their differences from 'ordinary' people. Artifacts of this phase include the three biographies of Carry Nation (while there are few biographies of first-rank leaders of the Prohibition party or Anti-Saloon League), and its capstone was Andrew Sinclair's Era of Excess, which pictured prohibitionists as rural fanatics and their crusade as a social aberration, a manifestation of extremism provoking extremism in return. The second phase has been characterized by a determination to understand the passage of the Eighteenth Amendment rather than to justify the Twenty-first. It began with James H. Timberlake's Prohibition and the Progressive Movement and Joseph R. Gusfield's Symbolic Crusade: Status Politics and the American Temperance Movement, both published in 1963. These works and their successors were based on the assumption that the movement is important because of the ways in which prohibitionists were like other Americans, not because of the ways in which they were different. In demonstrating the likenesses between prohibitionists and other Americans, they have demolished Sinclair's picture of rural fanatics and have shown instead that the prohibition crusade was firmly rooted within the native middle class."

The classic American Temperance Movement -- Bacon, Classic temperance movement of the U.S.A., Brit. J. Add. (1967), pp. 7-8.

"During the period 1820 to 1920 in the United States a series of mass movements occurred which can roughly be characterized as 'reform'. These movements had various characteristics of which I wish to mention a few as being highly significant for the Classic Temperance Movement. One was the matter of absolute right and absolute wrong, of moral righteousness on each and every side. A second was the persisting view that if only this or that law could be passed, then social problems would be resolved. A third was the belief in a somewhat simplistic educational approach; that is, if you tell enough people enough times in sufficiently striking terms whatever it is you want them to believe or do, that then they will so think and act. A fourth characteristic, rather different from the situation in Europe and Latin America, was the enormous role of women in formal organizations not only as members but also as leadership personnel in most of these movements....

"The Classic American Temperance Movement emerged in the late 1820's and by the 1840's dominated the scene. It is frequently stated that its great victory was National Prohibition in the 1920's. May I assure you that this was but a passing symptom, that the Movement's power and its impact on the society were of a far greater significance than this short-lived national legislative incident, which was itself an achievement not expected by the Movement's leaders and one which severely diminished its influence, its activities, and its membership. The Movement, later to be stereotyped as the most arch-conservative and narrowly concerned force in the society, started as a radical, dynamic, and fiercely aggressive group with extraordinarily broad social concerns--for example, world peace, rights of labor, universal education, and the rights of women.

"In relation to alcohol, the new group rejected most of the positions of the original temperance movements. The following changes occurred: one, all alcohol beverages (not just distilled spirits) were to be the target of attack; two, alcohol was itself defined as evil and as the cause of evil; three, it was accepted as revelation that the Holy Bible whenever and wherever it mentioned alcohol beverages always did so in terms of its being an absolute evil...four, although moral suasion for voluntary abstinence was still held to be a fine thing, it was sharply downgraded as a means of resolving the problems; five, the major means for the new Movement was passage of legislation to eliminate alcohol beverages; six, education of youth was to continue, but its tone was sharply changed from one stressing moderation to one which labeled all alcohol as poison, all use as sinful, unpatriotic and criminal, and all the results of use as disease, degradation and death; seven, the leadership of the movement moved from that of men, of businessmen, farmers, physicians, to leadership by Protestant church groups (with occasional massive Catholic attacks on drunkenness) and leadership by women. It became noticeable about 1890 that there was a marked urban-rural difference with

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rural areas generally showing the great strength of the Classic Movement. Also by 1900-1910, the Movement showed far less concern with other social problem areas and gave almost its entire attention to alcohol."

Who were the Prohibitionists? -- Blocker, Retreat from Reform (1976), pp. 8-14.

"Recent historical research has shown that the prohibition issues attracted considerable urban support, and the men and women who formed 'the backbone of the dry cause,' to use Andrew Sinclair's phrase, were anything but the disgruntled, bypassed rural isolates of Sinclair's conception. The career lines of 641 leaders of the Prohibition party and Anti-Saloon League, active between 1890 and 1913, make clear that these men and women swam with the main-stream of American development in their time.

"Two-thirds of the prohibitionist leadership was born in the Northeast...Prohibitionists leaders were more urban in origin and residence than the general population....Although a firm conclusion is impossible, the individuals who led the prohibition movement seem to have gained upward occupational mobility...Evangelical they were....Of those who reported Civil War service, three-quarters had fought on the winning side. Of those who claimed previous party affiliation, three-quarters had been members of the Republican party.

"Educated, mobile geographically and probably occupationally, winners in politics as in battle, living in close contact with the dominant social forces of the century--urbanization and industrialization--these men and women had every reason to feel at ease in the world which they had helped to create. Why then did they dissent?

"To answer this question, we must examine the prohibitionists in their cultural, social, and political contexts. No historian would argue, I think, that Americans by 1900 shared a common culture. In the antebellum years, regional economic and social differences had produced regional cultures; and in the late nineteenth century, class and ethnic differences emerged in the wake of industrialization, urbanization, and massive immigration....

"...[T]he adult generation of the 1890s stood at a hinge-point in American cultural styles generally and in the middle class life-style in particular. A society which had put self-restraint to the serve of production was giving way to one which could maintain production only by encouraging consumption....

"...The middle-class activities of the late nineteenth century believed that, as American society had created the wealth and status which they enjoyed, so too could it produce first a middle-class, then a national culture which would legitimize their achievement.... Restrain and the values clustering around it--industry, frugality, and sobriety--explained their own personal achievement; now restraint, self-restraint if possible, social control if necessary--was to cure industrial society of exploitation and heal its resultant social divisions.

"All this is a way of saying that prohibitionists were not unhappy simply because other people drank too much...."

The symbolic roots of Prohibition -- Gusfield, Symbolic Crusade (1963), pp. 94-122.

The goal of Temperance through direct prohibition of sales was more in common with Populism and radical social Christianity than it was with conservative and progressive reforms. The Prohibitionist platforms were the sentiments of farmers who saw themselves oppressed by urban financial institutions, manufacturing interests, and the political machines. The Prohibitionist appeal was not based on any effort to convert the sufferers as was the conversionist doctrine of the WCTU. Prohibition assumed that its views represented moral righteousness and that the drinkers could not be converted by means other than legislation and force. The bridge between Populist and Prohibitionist ideology is crucial (pp. 94-96).

Within the context of Populist antipathy to urban and Catholic communities, the saloon appeared as the symbol of a culture which was alien to the ascetic character of American values. The rise of Prohibition strength owed a great deal to the sense of cultural change and prestige loss which accompanied both the defeat of the Populist movement and the increased urbanization and immigration of the early 20th century (pp. 100-102).

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The public affirmation of norms is a sign of societal dominance. It is a symbol of the social status and prestige accorded to those who are identified with the public norms. Moral indignation thus arises when that status is threatened. In the period of Prohibition, the legal status of abstinence produced a strong sense of societal dominance among Temperance adherents. It was as important to maintain the legal affirmation of Prohibition as it was to enforce it. Repeal, therefore, represented the loss of societal validity and the decline of societal status of the Protestant, rural, native upholders of Prohibition" (pp. 116-117).

It is still Temperance doctrine that Prohibition was never really tried, was foiled in practice by its enemies, and cannot be said to have been rejected by the American people. Here, again, what is protected is the claim to legitimacy and social dominance" (p. 122).

The success of the Anti-Saloon League -- Odegard, Pressure Politics (1966), pp. 78-79, 104-105.

"In a very real sense national prohibition represents a growth, and a rather slow, deliberate growth at that. It is true that the political activities of the myrmidons of morality must account for a large measure of the success which has attended the temperance people. But it is not the sole explanation. Moral and economic beliefs are not crystallized into law without the backing of a considerable constituency and the existence of a pretty well-defined opinion. The most that can be said of the Anti-Saloon League is that it provided an organization through which this constituency made itself effective. In final analysis, its success depended not only upon its ability to make prohibition sentiment, but also upon its ability to build an effective political machine upon the basis of an already existing body of opinion....

"The outstanding features of the methods used by the Anti-Saloon League are: (1) centralization of authority; (2) singleness of purpose; (3) political utilization of the power of the Protestant churches; (4) avoidance of entry into politics as a separate political party" (pp. 78-79).

"The Damoclean sword which the Anti-Saloon League dangled over the heads of practical statesmen was the threat of political defeat. The man or the organization which seeks to make itself effective in lawmaking under the system of representative government must, directly or indirectly, command votes....Had the Anti-Saloon League not demonstrated its ability to elect and defeat candidates for public office, it is probable that the Eighteenth Amendment would still be a chafing word-symbol in the mind of some political ideologist. Had the League been confined to moral appeals, it would have accomplished no more in the realm of practical legislation than Christian missionaries could accomplish in a well-fed heathen land. But with the strong appeal of bread to starving heathens, and with the appeal of re-election to aspiring politicans, converts are readily made. It should be kept in mind that whatever power or influence the League developed in legislative lobbies is attributable to the votes of the people back home who take their political advice from the League" (pp. 104-105).

Populism, Progressiveism, and Prohibition -- Hofstadter, Age of Reform (1955), pp. 289-290.

"When the crusading debauch [of Populism and Progressives] was over, the country's chief inheritance from the Yankee-Protestant drive for morality and from the tensions of the war period was Prohibition. To the historian who likes to trace the development of the great economic issues and to follow the main trend of class politics, the story of Prohibition will seem like a historical detour, a meaningless nuisance, an extraneous imposition upon the main course of history. The truth is that Prohibition appeared to the men of the twenties as a major issue because it was a major issue, and one of the most symptomatic for those who would follow the trend of rural-urban conflicts and the ethnic tensions in American politics. It is also one of the leading clues to the reaction against the Progressive temper. For Prohibition, in the twenties, was the skeleton at the feast, a grim reminder of the moral frenzy that so many wished to forget, a ludicrous caricature of the reforming impulse of the Yankee-Protestant notion that it is both possible and desirable to moralize private life through public action.

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"To hold the Progressives responsible for Prohibition would be to do them an injustice. Men of an urbane cast of mind, whether conservatives or Progressives in their politics, had been generally antagonistic, or at the very least suspicious, of the pre-war drive toward Prohibition; and on the other side there were many advocates of Prohibition who had nothing to do with other reforms. We cannot, however, quite ignore the diagnostic significance of prohibitionism. For Prohibition was a pseudo-reform, a pinched, parochial substitute for reform which had a wide-spread appeal to a certain type of crusading mind. It was linked not merely to an aversion to drunkenness and to the evils that accompanied it, but to the immigrant drinking masses, to the pleasures and amenities of city life, and to the well-to-do classes and cultivated men. It was carried about America by the rural-evangelical virus: the country Protestant frequently brought it with him to the city when the contraction of agriculture sent him there to seek his livelihood. Students of the Prohibition movement find it easy to believe that the majority sentiment of the country stood in favor of Prohibition at the time the amendment was passed and for some years before; for even many drinking people were sufficiently persuaded by the note of moral uplift to concede that Prohibition might, after all, be a good thing. And even if the desire for Prohibition was a minority sentiment, it was the sentiment of a large minority, one whose intensity and insistency gave its members a power disproportionate to their numbers. Politicians, at any rate, catered to their demands, and there were among them some--one thinks of Bryan as Secretary of State with his much-ridiculed wineless dinners or of Josephus Daniels with his absurd insistence on depriving the Navy officers of their drink--who unquestionably believed that the conquest of the demon rum was one of the important tasks of political life."

Similarities between the Prohibition and Progressive Movements -- Timberlake, Prohibition and the Progressive Movement (1963), pp. 1-3.

"Between the accession of Theodore Roosevelt to the presidency in 1901 and the repudiation of Woodrow Wilson in 1919, Americans gave vigorous support to two great crusades: one to preserve democracy at home and the other to make the world safe for democracy. The Progressive Movement of these years came as a reaction to a long period of dominant conservatism during which the nation had undergone a rapid transformation from a predominantly rural to an urban-industrial society....Embodied in the dynamic energy of Roosevelt and the lofty idealism of Wilson, the Progressive Movement endeavored to come to grips with the two great problems threatening American democracy: the growing power of big business on the one hand, and, on the other, the mounting discontent of the lower classes, especially among urban-industrial workers. It sought to solve these two problems by democratizing the machinery of government and using government to control big business and to improve the lot of the underprivileged.

"To achieve these ends, the Progressive Movement embraced a wide variety of individual reforms, one of the more important and least understood of which was prohibition. Although today sometimes regarded as a conservative measure, prohibition was actually written into the Constitution as a progressive reform. As an integral part of the Progressive Movement, prohibition drew on the same moral idealism and sought to deal with the same basic problems...

"Prohibition did not command universal support, however, for its appeal lay largely with the old-stock, middle-class section of the American community. Other progressives, especially those identified with the urban-labor-immigrant elements, disliked the reform and fought it. Although the two groups often cooperated on other measures, they disagreed on the question of prohibition. But because the old-stock middle class constituted the backbone of the Progressive Movement and wielded disproportionate political power, it was able to overcome the opposition of the urban masses and to impose its own standard of sobriety on the nation by law."

The politics of fear -- Sinclair, Era of Excess (1964), p. 46.

"The drys used other potent weapons in the second wave of prohibition. What appeared to be their greatest threat, the Prohibition party, founded in 1869, was the least. Party political action helped their cause far less than psychological conditioning. Until a large enough group of people had been guided toward their policies, the Prohibitionists would lose at the polls. And so, partly consciously and partly subconsciously, the temperance forces worked on those hidden urges in America and Americans which might help them. The emotion

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which they exploited was fear: the fear of sin and God; the fear of race against race and skin against skin; the fear of venereal diseases; the fear of idiot children; the fear of violence suppressed by conscience and loosed by liquor; and the dark sexual fears of civilization. Francis Bacon may have found nothing terrible except fear itself. But the fear of others was the hope of the drys."

The brewers and the saloons -- Merz, Dry Decade (1931), p. 5.

"If there was any single factor which had rescued the prohibition movement from its own inertia in the past and now given it a fresh start forward toward its goal, it seems fair to say that this factor was the attitude displayed toward all this agitation by the brewers and distillers.

"These gentlemen had a large stake in the controversy over liquor which had been in progress now for more than fifty years. They had a stake, by 1913, which may conservatively be estimated as worth a billion dollars. They wished to preserve this stake, and they chose a method of preserving it which has frequently been tried by organizations under fire and very often failed: they stood pat in the face of an opposition whose strength they underestimated and scorned all talk of compromise.

"There was never a moment in the history of these years when the brewers could not have reformed the institution which was the chief point of attack in the campaign against their vested interests made by the prohibition movement. This institution was the saloon. The power of the brewers over the saloon was absolute. They controlled it under mortgage bonds and under their power to shut off its supply. They could have changed the saloon, or even have destroyed it, if they had wished to act."

Source of urban and business support -- Furnas, Late Demon Rum (1965), pp. 308-312.

"The League's doctrine of city-vs.-country had a good deal in it. There really was a sharp significant contrast between the Old-White-Protestant-American, farm-oriented, preacher-ridden, culturally Temperance-minded tank towns where the League best flourished and the industrialized cities that contained the bulk of the new immigrant population. That climate was mostly Catholic, its politics were saloon-based, most of the barkeeps were Irish or German, and the premises often harbored prostitutes and gambling....

"The cleavage was not as clean, however, as is sometimes represented. The sinful big city's well-off suburbs were utterly unrural, yet they often voted Dry on local-option because saloons were low and attracted undesirables. That was part of the upper-vs.-lower-orders flavor that had always been strong in Temperance....The city-vs.-country contrast was further blurred when, as the League's muscle began to show, many founders of great city-based fortunes lent it heavy support. The Rockefellers, John Wanamaker, J.L. Hudson, S.S. Kresge, Andrew Carnegie and other industrialists and merchants only slightly less redoubtable gave money and personal encouragement. They could readily do so because, unlike the Prohibition Party, the League had no truck with wild-eyed ideas except suffrage and that only on Tuesdays and Thursdays.

"Some such benefactors of great wealth, like Wanamaker, contributed heavily at least partly because of their copybook maxim, Sunday-school kind of piety. The approach of others was largely economic: That saloon at the factory gate meant hangovers, hence injuries and breakdowns that were increasingly expensive as machinery in steel mills, food-processing plants and so forth grew complicated. Then Workmen's Compensation laws making employers liable for most accidents forced them to insure and to campaign for on-the-job safety--which led to further discouragement of off-the-job drinking. An undercover man for the United States Brewers' Association also heard from an officer of the Iron and Steel Institute that employers were backing the Drys because drinking employees meant pressure for higher wages--taking booze-money out of the pay envelope left too little to buy the round steak the wife wanted. In any case, saloons, alien riffraff and labor agitation had long gone together in the boss's mind, as is made clear in T.S. Arthur's The Strike at Tivoli Mills (1879). The bomb scares of the 1800s left the impression that beer saloons were typical haunts of bearded, German-reared, Anarchist assassins. In many industrial neighborhoods saloonkeepers found it good business to maintain an upstairs meeting hall for the use of union locals.

"So industrialists moved from merely subsidizing the League to active help in getting its anti-Demon propaganda into the men's hands....

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"At the same time, the intellectual standing of Prohibition was improving. Temperance had not yet lost its acceptability as a good cause--it took Prohibition to effect that. But it had been growing corny. Now, in the early 1900's, the atmosphere of the muckraking era rehabilitated its social standing. The times deplored unscrupulous Big Business, and the distilling and brewing interests were as noisome as any. Social service had become a profession, and the social worker's nose--often that of a fairly strait-laced lady--was often rubbed in misery attributable to The Saloon. There was a new wave of medical slander of the Demon and a shaky but flashy sociology of the same tenor, waving alcoholism firmly into the family trees of the famous Kallikak and Jukes strains of degenerates.

"When much of Big Business and most of urban Reform thus threw in with Chautauqua lecturers and crossroads deacons--John D. Rockefeller, Upton Sinclair, William Jennings Bryan and Carry Nation all in the same camp--the rumseller was a gone goose. In The Nigger by the brilliant young Edward Sheldon, the New York theatre saw whiskey depicted as the detonator of Negro lust and violence in the South and heard its noble politician-hero call Prohibition "the only way in which we can attack the niggah problem." Magazines were full of the scientific and social horrors of drink...Even the new motion pictures worked in the Demon's disfavor: They gave the workingman an inexpensive evening recreation that tended to keep him out of the saloon and with his wife; and the drift of the scenarios was overwhelmingly Dry, heavy with the curse of drink, the foulness of saloons and the association of sin with wine on the table."

Evangelical Protestant Chruches and Prohibition -- Blocker, Retreat From Reform (1976), pp. 82-84.

"The history of the evangelical Protestant churches' attitudes toward the liquor traffic in the nineteenth century was a record of increasing hostility, but the history of Prohibitionist relations with those churches was a story of frustration engendered by the gap between Prohibitionists' expectations and the churches' performance. From the earliest days of the movement's revival after the Civil War this gap was evident....

"Feeling obligated to support prohibition as a "moral reform," yet at the same time anxious to avoid association with a political party, evangelical Protestantism in the early 1890s refused support for the Prohibition party while offering vociferous rhetorical opposition to the saloon. This situation drove party Prohibitionists to distraction and stirred in many of them an increasingly bitter hostility toward the churches, which in turn alienated church members from the party still further....The hostility between the churches and the prohibition movement as a whole did not disappear until the Anti-Saloon League constructed its base in the churches during the years after 1900.

"To understand the uncertain course of the evangelical Protestant churches' relations with the prohibition movement in the late nineteenth and early twentieth centuries requires a broader view of the secularization process than has normally been taken. Prohibitionists unquestionably contibuted to the decline in ecclesiastical authority which historians agree was taking place in the late nineteenth century. They did so by employing arguments for temperance which, although they often began in an attempt to demonstrate the relevance of sacred texts to the modern condition, ended by citing drink's moral and physical effects upon society and the individual rather than the authority of scripture. With such friends, the churches needed no enemies. Organized evangelical Protestantism had two choices, neither of which looked very promising. It could retain the scriptural basis for social action and at the same time keep a healthy distance between itself and the prohibition movement. This was the course taken during the late nineteenth century. Unfortunately, espousal of temperance coupled with refusal to aid the political advocates of temperance created an appearance of hypocrisy--a weakness which Prohibitionists quickly perceived....

"By the turn of the century, however, the churches were to become receptive to new prohibitionist overtures. Although Anti-Saloon League arguments for prohibition were couched in the same worldly terms as those of their predecessors, such arguments were subordinated to the promise of institutional regeneration through political action. Apparently feeling more isolated than before, many churches took League promises at face value. Like the symbol of social purity, the prohibition cause permitted cooperation across denominational lines and acted as a moral cement for religionists as they applied themselves to social reconstruction. Thus, organized evangelical Protestantism implicitly gave up the scriptural basis for social

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action in exchange for the promise of social influence through political cooperation with the Anti-Saloon League, only to find itself by 1933 bearing the double burden of failed politics and, in urban alienation and rural Fundamentalism, diminished intellectual hegemony."

The weakness of the Volstead Act -- Sinclair, Era of Excess (1964), p. 169.

"The Volstead Act was full of flaws. It was the result of compromises in the House and the Senate between the determined dry lobbyists and a majority of the members of Congress who did not desire that the Eighteenth Amendment should be rigidly enforced. Even the drys in Congress did not want to jeopardize the amendment by making the Volstead Act too severe and by causing a public revulsion against national prohibition. Only three members of the House voted for an amendment to the Volstead Act on July 21 to make the home possession of liquor unlawful; both drys and wets opposed such a stringent provision. The aim of the act was to secure as much enforcement as the country would endure, not total enforcement.

"The faults in the framing of the Volstead Act were quickly revealed, once national prohibition was put into effect. Yet these shortcomings were no reflection on the sincerity of the drys. They wanted prohibition to be enforced as efficiently as possible; but they knew that Congress and the wet cities would not allow them to get all they wanted. Even so, by the compromise of the Volstead Act, they did the dry cause great damage. They did not secure the blessings of good law enforcement for their supporters, and they gave great cause for resentment to their opponents. The provision that allowed the making of home cider and light wines seemed a monstrous discrimination in favor of the farm against the town....

"But perhaps Congressman Crago, of Pennsylvania, best put the objections of those old-fashioned Americans whom the Volstead Act was designed to protect. He feared that the law would breed 'a discontent and disrespect for law in this country beyond anything we have ever witnessed before.' The act refused trial by jury in some cases; it confiscated personal property; it extended the power of the judiciary beyond anything since the shameful days of Judge Jeffreys in England; it invaded the sanctity of the home; and it made 'crimes of the ordinary harmless housekeeping acts of nearly every family in our country.'"

Congressional inaction during Prohibition -- Merz, Dry Decade (1931); p. 228.

"The strategy of the average Congressman was to play the situation both ways as effectively as possible. By making... 'dry pronouncements' he could win the valuable support of the Anti-Saloon League and its allies. By keeping the cost of enforcement so low that it would neither add unwelcome taxes nor shut off the sources of illicit liquor he could hope to stave off an organized political revolt on the part of the opponents of the law.

"The net results could accurately be described as a stalemate. The friends of prohibition had elected a Congress which would make dry pronouncements till the record bulged. The enemies of prohibition had impressed this Congress with the desirability of making no real effort to enforce the law."

Enforcement theories and realities -- Merz, Dry Decade (1931), pp. 264-266, 279, 288.

"It had always been the theory of the federal government that responsibility for local enforcement of the Volstead Act properly rested on the states. The federal government, to be sure, had conducted an enormous number of local raids....The federal government had always been involved in a certain amount of local police work, but never deeply enough involved to enforce the law effectively. Such responsibilities as it had accepted in this field it was plainly reluctant to expand.

"There were two chief reasons for this reluctance. In the first place, various spokesmen of the government had long insisted that a policy of too active interference from Washington in the police work of the states would be certain to result in confusion and resentment....

"In the second place, any such activity would be certain....to involve the federal government in enormous expense inevitably requiring the imposition of new taxes....

"In these circumstances, reluctant to accept either the heavy cost of an adventure with a federal police force or the political consequences which such an adventure might entail, the federal government had insisted from the outset that its own responsibilities were

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limited and that the duty of supplying an effective staff of agents for local police work was clearly imposed on the states by the clause in the Eighteenth Amendment which gave the states 'concurrent power to enforce'." (pp. 264-266).

"If one fact was abundantly clear by 1930 it was the failure of the federal government, after ten years of earnest exhortation, to persuade the states to make a realistic effort to enforce prohibition in the United States. The states, with six exceptions, had been willing to enact and to retain on their statute books a quantity of legislation. They had not been willing to appropriate more than a pittance for the enforcement of this legislation" (p. 279).

"Widespread disregard of the law, indifference in the state legislatures, and unwillingness on the part of the federal government to accept the entire burden of enforcement: these were the decisive factors at the end of 1930. Where the law was liked, it was obeyed. Where it was not liked, there was nothing to enforce it except the same familiar sequence of ineffective drives, of ultimatums with no force behind them, of mobilizations and remobilizations of a small staff in a few strategic spots, of padlocks picked after the key was turned, and of light fines in the courts on bargain days" (p. 282).

The failure of Prohibition -- McCarthy and Douglass, Prohibition and repeal, in McCarthy, ed., Drinking and Intoxication (1959), pp. 378-382.

"Proponents of National Prohibition have leveled many criticisms at the administration of the law, implying that were it not for the administrative shortcomings this type of attempt to control the problems of intemperance would have been effective. Many of the criticisms are undoubtedly justified although the implication drawn is open to serious question. Among these administrative or executive blunders were the following: (1) The function of enforcing the law was placed in the Treasury Department rather than in the Justice Department. (2) To allow production of alcohol for scientific, industrial, medicinal and sacramental purposes, a most complicated license and permit system was developed, a system almost incapable of adequate supervision. (3) At no time during Prohibition was there adequate personnel for enforcement of the law. (4) The personnel was not subject to Civil Service until 1927 and was never paid on a basis sufficient to attract effective or, often, honest workers.

"There was practically no precedent on which the government could base a comprehensive program of enforcement of the Volstead Act. Moreover, the situation throughout the country was anything but static. As the supplies of legal liquor existing in 1920 dried up, an increasing flow of illicit liquor began to take its place and changes in enforcement policy became frequently necessary. The difficulties of securing convictions and the indifference and even resistance toward enforcement displayed by many state and local officials as well as large sections of the public began to render the law ineffective....

"Ardent prohibitionists insisted that the major weakness of the Volstead Act resided in its failure to make the purchaser as well as the vendor of the illegal liquor guilty of crime. There is serious doubt that a law could have been passed which incorporated such a provision. It is obvious, however, that the enforcement of Prohibition was handicapped in a situation in which one party to a transaction was a criminal and the other party--without whom the transaction could not have been consummated--was blameless.

"Many explanations have been made of the failure of Prohibition, including inadequate enforcement, and corruption in public office. It cannot be doubted that one ingredient which would be essential for the successful enforcement of a prohibition law was ultimately lacking--popular support. However much public sentiment the advocates of Prohibition had mustered in favor of the experiment before the Eighteenth Amendment was passed, sufficient popular support for its enforcement was not in evidence in the succeeding years. This is not to state that the experiment was a failure to the same extent or in one fashion throughout the land. As a national program, however, the 1919-33 attempt fell short of its goals (pp. 378-9).

"Perhaps the outstanding product of the experiment was the fact that public concern about the problems of intemperance was forgotten in the dramatic fight about Prohibition. Attacking or defending the concept of Prohibition achieved the center of the stage and succeeded

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in pushing all other matters into a position of obscurity. The word temperance, for example, had come to mean Prohibition. In 1934, there was no program for the alleviation or prevention of alcoholism, nor was there a group prepared to meet this problem. Since the passage of the Eighteenth Amendment a new and vexatious problem related to intemperance had risen--drunken driving of automobiles. There was no program and no group to cope with this problem. Between 1918 and 1934, the customs of drinking and the segments of the population using these customs had changed rather dramatically. There was no program of education to meet this change. Furthermore, attempts to do anything along any of these lines were handicapped because they were popularly interpreted as movements for or against Prohibition" (pp. 381-2).

Success and failure -- Blocker, Retreat from Reform (1976), pp. 235-244.

The questions of why prohibition succeeded and why it failed remain. Monographic studies of particular states and topics are insufficient in number and too uneven in quality and coverage for firm answers. Nevertheless, several models have been advanced. The pressure politics of the Anti-Saloon League were decisive. After all, the League's methods were best suited to influencing the Congressmen and state legislators who submitted and ratified the Amendment. While submission and ratification indicate the ability of the League to manipulate legislators, they do not necessarily reflect a popular majority in favor of prohibition. Most of the prohibition victories came in the less populous states. The larger the state, the less likely it was to hold a referendum; if one was held, the larger the state, the less likely it was to approve. It seems unlikely, therefore, that prohibition enjoyed majority support before ratification made the question academic.

Nor can popular support for prohibition be explained as the result of rural America's attack upon its cities. During 1900-1918, 21 referenda in rural states approved prohibition, but so did ten referenda in urban states; meanwhile, 10 referenda in rural states rejected prohibition, but only eight referenda in urban states did so. Any argument based on groups below the state level cuts both ways. To say, as Joseph R. Gusfield has done, that the political power of rural populations was essential in securing dry supremacy at state and national levels begs the question. The political power of the urban middle class, as Timberlake as pointed out, was also essential.

One theme which middle-class supporters of prohibition undoubtedly found appealing was the old invocation of national unity through national self-restraint. The period from 1910 to World War I has aptly been called "the age of industrial violence.". But prohibition triumphant as a symbol of national unity does not tell the whole story. For the prohibition movement which the middle class brought to power in 1919 was far less committed to cross-class cooperation than the prohibition movement which the middle class had rejected in the 1890s.

The middle class supported prohibition primarily because of a social outlook which stemmed not from slipping status but rather from the inescapable growth of the corporation and the resulting militancy of labor. The middle class supported prohibition in order to shore up their damaged society and prove themselves to be caring and potent members of that society. At the same time, they kept their distance from the object of reform--the lower class--and carefully refrained from attacking the corporations which posed the greater threat to the middle-class dream of a just and harmonious America. The liquor industry also made a good target for Progressive reformers because of its concentration, participation in political corruption, and indifference to the suffering it caused.

By 1933, prohibition had failed in the very important sense that the measure which the prohibition movement had presented as the ultimate solution to the problem of liquor abuse had been overwhelmingly repudiated by the American people. Part of the reasons for this must lie in the various scandals, inefficiencies, and harrassments resulting from Prohibition enforcement. More important was a long-term change in drinking patterns caused by the increasing encouragement of consumption in all goods which was required by an advanced capitalist society.

Success and failure -- National Commission, Control of Marihuana, alcohol and tobacco, in Marihuana: Signal, App. I (1972), pp. 506-511.

"One of the great ironies of the prohibition era was the fact, noted by the Wickersham Commission, that women happily took to drink during the experimental decade, and, what is more, did so in public. Drinking at an earlier age was also noted, particularly during the

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first few years of Prohibition. To be sure, the Volstead Act was enforced in the United States wherever it had popular support. In the rural South and West Prohibition was effective and in some cases still is. The failures of Prohibition enforcement were spotlighted in the big cities where the law was flagrantly defied and in the smaller towns, populated by miners and industrial workers, where the law was simply ignored (p. 506).

"Notwithstanding the weak enforcement of the Volstead Act, some believe that it was only the coming of the Depression with its demand for increased employment and tax revenues which finally killed the experiment (Gusfield, 1963:127). Others observe that Prohibition was a by-product of the stress and excesses of war and could not have survived in peacetime even under optimal economic conditions (Sinclair, 1962:23-24)."

"In discussing the relative successes and failures of Prohibition, most observers conclude that the undertaking failed. The Wickersham Commission concluded that the country had Prohibition in law but not in fact. They reported:

> There was general prevalence of drinking in homes, clubs and hotels.... Throughout the country people of wealth, businessmen and professional men and their families, and the higher paid workingmen and their families, are drinking in large numbers in open flouting of the law. And neither Congress nor the states set up adequate machinery or appropriated sufficient funds for the enforcement of the prohibitory legislation. Federal and state legislation, as a matter of fact, strove to satisfy so that, as it was aptly said, the drys had their prohibition law and the wets had their liquor!

"Although some view the theory of prohibition as reasonable, it is generally conceded that the realities of manufacture and distribution make it unworkable, for in one form or another, alcohol can be easily produced by farmers, high school chemistry students, and ordinary citizens" (p. 508).

The aftermath of Prohibition -- Sinclair, Era of Excess (1962), pp. 398-399.

"The opportunity for efficient regulation of the liquor traffic had been let slip at the end of repeal. Although this was partly due to the weakness of the drys after 1932 and to the strength of the fanatical wets, it was also due to the indifference of the American people....

"In this lassitude about liquor laws, this infinite weariness about the evils or virtues of drink, the crazy quilt of American regulations for drinking was allowed to develop haphazardly, a tribute to the interaction between a powerful and dangerous drink trade, a preoccupied federal government, inadequate local administrations, and an indifferent people. If much of the present liquor problem in America is the price of dry laws, too hastily adopted and too hastily repealed, then the fault must be put to a national characteristic, an urge towards excess which has made this nation great in a small time, and has left little room for moderation."

Legacy of the temperance movement on drinking patterns and politics -- Bacon, Classic Temperance Movement of U.S.A., Brit. J. Add. (1967), pp. 10-11, 17.

"Clearly more important than [the] spasmodic legislative activities is the truly massive impact of the Classic Movement on intellectual and emotional responses and on actual behaviors relevant to the use of alcohol beverages in the United States....

"I believe that the major beliefs and assumptions of the Classic Movement...were, in various ways, accepted. They were accepted, as I see it, by almost everybody in the society....

"...[T]he greatest impact was perhaps upon users of alcohol. They too accepted the Movement's message. It has been noted by almost all observers for decades that by and large Americans of the U.S. are anxious, confused, at times even guilt-ridden about their attitudes towards drinking. This becomes manifest in their angry confusion about young people's drinking, in their secretive reactions not only to drinking problems but also to moderate usage, in the marked discrepancy between their formal statements and actual practice, in

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the ever-present rationalizations about number of drinks or even the fact of their drinking, and on and on. Please note that this description relates to attitudes, to reasoning, and to policy making. It should not be thought for a moment that the act of drinking was in question as a behavior; the great majority of adults in the U.S.A. are users of alcohol beverages and there is no indication of any serious trend towards giving up that activity." (pp. 10-11).

"...[T]he impact of the Classic Temperance Movement was and is today so great that we can only speak of the current situation vis-á-vis alcohol problems in the U.S.A. as being in flux. I will speak first to some of the liabilities. Although recognition and irritation and demand for new action is emerging, it is still overwhelmingly negative: that is, no new consensus, no new philosophy for action has emerged. Second, there still remains the cycling or repetition of old maneuvers, sometimes under new names: Prohibition is finally gone from all the States, but often enough it is replaced by little, local, and partial prohibitions..." (p. 17).

Legacy of prohibition -- National Commission, Control of marihuana, alcohol and tobacco, in Marihuana: Signal, App. 1 (1972), p. 510-11.

"What...did Prohibition accomplish? To a great extent it eliminated the saloon from American life. While bars and taverns reopened joyfully following repeal, they ceased to be the centers of systematic political corruption and debauchery which they had once been. Part of this may be attributable to the greater sophistication of the electorate and politics generally. Part, no doubt, is owning to the fact that women were welcome as customers in the new cocktail lounges, having shown themselves to be eager patrons of the speakeasies.

"And finally, the change in the character of the saloon was effected by public determination that it should be changed. This attitude was expressed in the post-repeal statutes concerned with the physical appearance of the saloon, and the character of persons authorized to operate them.

"Prohibition did make the nation conscious that corruption of the law and of the populace may be the consequence of a law which is not reflective of the morals and mores of the time. It played out some of the deepest social class resentments, culminating in the realization that the behavioral standards of some could not be impressed upon others. It demonstrated that the fervor of war and the cult of patriotism may be abused--and abuse the country in return" (pp. 510-11).

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22

Opium

China

1700-1860

BACKGROUND

Opium was no novelty to China when Europeans began to import it, but its use had previously been limited to medicinal purposes. The opium poppy was probably introduced as early as the 8th century when Arab traders came to China. At first only the seeds were used in a medicinal beverage. It was not until the 12th century that the capsule itself was used, and not until the 15th century that the medicinal use of pure opium was fully elaborated and native opium was manufactured. Although recreational use may have occurred sporadically since the late 13th century, it was not a problem until the introduction of opium smoking in the early 18th century. In the late 1690s the smoking of tobacco-opium mixtures spread to China from the East Indies and in 1729 the first imperial edict was issued against opium smoking, inaugurating 180 years of unsuccessful, draconian efforts to prohibit its import and use. By the 19th century opium was flooding into the country, principally from British India, and in 1839-1843 and 1856-1860 the Chinese fought the British and were defeated in two so-called Opium Wars, the end result of which was the legalization of opium in China. (The opium trade itself did not end until 1906.)

The history of opium use in China is a rich field for exploration. Why did the Chinese develop such a preference for opium and tobacco over alcohol and especially cannabis, which had been cultivated in China for centuries? What was the relationship between the spread of tobacco smoking and the rise of opium smoking? The new vice of opium-smoking first became established in the areas where tobacco smoking was first introduced, and in many respects the history of tobacco smoking in the 17th century parallels that of opium smoking in the 19th century (see persp. 7). Why did the importing nation of China develop a greater opium problem than India, the opium producer? The differences between India and China in this regard will be explored in more detail in perspective 23. The evidence suggests this was in part related to the greater predominance of recreational opium smoking in China (as opposed to oral, medicinal use in India) and the lack of moderating social controls. Also, the Chinese reaction toward opium was rooted in the antagonism toward foreigners who imported it and concern over the depletion of silver which the widespread purchase of Indian opium was creating. Another question is why the recreational use of opium as an indulgence did not begin until the 16th century with the simultaneous arrival of opium-smoking, contact with the West, and internal dislocation and dynastic decline. What was the role of the general socioeconomic and political conditions of the time in encouraging use, and what was the role of opium itself in contributing to the decline of Chinese society? Did opium, as many assert, undermine China's stability and strength in a crucial period when its weak government was being tested by the expanding Western powers? The causal relationships between the spread of opium use and internal and external events in this period need further investigation, as do the influence of Chinese opium use and the British opium trade on subsequent attitudes towards drug use outside China (see, for example, persp. 23 and 24).

In this regard, it should be pointed out that although the opium trade was the major source of friction that resulted in the two wars with Britain, many authorities emphasize that the conflict transcended the issue of opium--that it was almost accidental that opium was the major vehicle for British trade exploitation, that the conflict was really over free trade and diplomatic relations--and that the war might as easily have been fought over molasses (3:167-8; 5:15). Furthermore, one of basic rationales for the British opium trade was that opium was the Chinese whiskey and as legitimate a commercial product as alcohol, tea, or coffee; that it was a product from which "the maximum revenue from the mimimum consumption" should be derived; and that if it were not supplied by the British, it would be by others (10:306).

CHRONOLOGY

c. 1700	INTRODUCTION	Use of tobacco-opium mixtures (madak) begins in the East Indies (probably Java) spreads to Formosa, Fukien and the South China coast (1:8; 7:155). In 1689, Engelberg Kaempfer inspects prim-

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		itive dens where the mixture is dispensed (Amoenitates Exoticae, 1712:642-5).
1729	FIRST EDICT	Reports reach Peking of the evils of opium smoking (shrivelling up of the features; early deaths) in Formosa and Fukien; Emperor Yung Chen prohibits the sale of opium and the operation of smoking houses. Opium merchants are punished by death, but buyers are not punished. From this time forward, opium selling for smoking purposes is regarded as a crime by the ruling authorities (7:156). The edict is not prompted by fears that the vice would engulf the empire but by a desire to irradicate a pernicious habit in a remote area which had produced an epidemic of lawlessness (3:16).
	SPREAD	Until well into the 18th century, opium smoking remains a localized phenomenon not regarded as a critical problem in Peking.
c.1750	BRITISH EAST INDIA CO.	The British East India Company assumes control of Bengal and Bihar, the opium growing districts of eastern India; British shipping dominates the Bengal opium trade out of Calcutta (1:12).
1757	EARLY TRADE	Britain annexes Bengal; the Chinese confine foreign trade to Canton where it can be restricted and controlled in the interests of revenue for the Chinese (3:50). Hong Kong merchants serve as intermediaries between the foreigners and the Chinese authorities (3:50; 4:11).
1767	OPIUM IMPORTS RISE	Opium from Bengal continues to enter China despite the edict of 1729 prohibiting smoking. It increases in frequency from 200 chests annually in 1729 to 1,000 annually by 1767. However, much is for medicinal use. Tariffs are collected on the opium (2:10).
1772	EAST INDIA CO. OPERATIONS	The East India Company establishes a limited monopoly over Bengal opium; the company has general control but the operation is in the hands of contractors, who advance company funds to the farmers, purchase the opium produced, and sell it to the company which then auctions it off to merchants in Calcutta. British companies are the principal shippers (3:26-27).
1773-86	LIMITED MONOPOLY	Warren Hastings, the first governor general of India, recognizes that opium is harmful and at first opposes increasing production; later he encourages the control of opium by the company hoping that by monopolizing and limiting the supply he will discourage its consumption. This limited monopoly lasts throughout his administration and beyond, but when the Chinese market is discovered, the monopoly shifts from controlling to expanding cultivation (3:25-26).
1779	OPIUM IMPORTED	First mention of actual trading in opium at Canton (3:63).
1780	PROHIBITION ATTEMPTED	British traders establish an opium depot at Macao. Another imperial edict prohibits consumption of opium and reiterates prohibition of its sale (5:219).
1787	BRITISH DEBATE OVER OPIUM	Trade in opium is still less important than trade in other commodities; directors of the East India Company, recognizing China's objections to the importation of opium, make offers to

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		prohibit the export of Indian opium to China. However, company representatives in Canton declare that the Chinese are never sincere in their declared intentions of suppressing illicit traffic, as long as the officials issue prohibitory edicts with one hand and extend the other to receive bribes from the illegal trade (3:76; 8).
1790-1800	OPIUM"S COMMERCIAL IMPORTANCE	The commercial importance of opium increases. The cost of European wars depletes Britain's monetary reserves of the bullion which they were using to purchase tea and silk in China. Accordingly, the British substitute Indian cotton and opium, and demand silver in payment (3:60-61).
	USE SPREADS; DECLINE CH'ING DYNASTY	Opium smoking reaches Peking in 1790 concurrent with the increase in the quantity of opium being imported. The once powerful Ch'ing dynasty is seriously weakened politically and economically by official corruption and domestic rebellion. Opium speeds up the decay. Chinese officials, and soldiers--underpaid, discontent, and often idle--are among the first to take up opium smoking (16:368)). About this time, the deputy governor of Canton writes: "...the use of opium prevailed only among vagrants and disreputable persons...but since it has extended itself among the members and descendents of reputable families, students, and officers of government many of whom are so infatuated in their attachment to the drug as to make habitual use of it....The weak and infirm perish gradually from want and hunger, while the strong and vigorous become thieves and robbers, the ultimate ruin of all being thus equally certain and inevitable" (20:27-28).
1796	PROHIBITION ATTEMPTED	Alarmed by increasing use, the emperor issues an edict forbidding importation of opium, as well as the export of Chinese silver that is being used as a medium of exchange. Now even legitimate trade is limited to barter. Nonetheless, illegal purchase of opium with silver continues.
1797	TRADE MONOPOLY	The company assumes full control of Bengal opium.
1799	TRADE, CULTIVATION BAN	A strong edict by authorities at Canton, supporting the emperor's decree of 1796, forbids opium trade at that port. A concurrent drive against native poppy growing is initiated (20:27). Opium becomes an illicit commodity (3:65).
	TRADE DIVERTED; SMUGGLING	The 1799 edict increases traffic through Macao and other areas beyond government control enabling unprecedented growth. The British declare only their legitimate cargo, leave opium on board to be picked up by Chinese merchants who smuggle it ashore in small, fast boats.
1800	ANTI-OPIUM POLICY DEVELOPS	Opium becomes identified with official corruption, criminals, and antigovernment secret societies. An imperial edict prohibits domestic cultivation and repeats the prohibition against importing opium. China develops an anti-opium policy, at least on paper. Edicts continue to be issued reiterating prohibitions against importation, sale, and consumption of opium (5:219; 3:65).
1804	CANTON TRADE RESUMES	Opium trading resumes at port of Canton. Though the 1799 edict is still in force, it has little effect and no immediate practical change in policy ensues (3:64).

CHRONOLOGY (Cont'd)

1807	PROHIBITION	The spread of opium into the provinces comes to the attention of the emperor who issues an edict enjoining harsher measures against offenders of the prohibition laws (5:19).
1813	IMPORT COMPETITION AND USE INCREASE	Emperor notices that opium use has penetrated the court. Harsh punishments are enacted (5:19-20). Imports of Malwa opium, not controlled by the East India Company, begin to increase; the competition for the opium market becomes critical (3:85). From 1811 to 1821 imports of both Bengal (British) and Malwa opium average over 340 tons a year (16:368).
1815	ANTI-TRADE MEASURES	The first important anti-opium trade offensive begins, and the Chinese government seeks to control smuggling by issuing new trade regulations requiring ship inspections and a system of bonding. Neither control has much success (3:78; 8:93).
1821	MORE STRINGENT CONTROLS	New and more stringent control measures are initiated. Native dealers at Macao are arrested; the senior Chinese merchant at Canton has his commission suspended; opium ships are ordered to depart from the Canton River.
	TRADE DIVERTED	Chinese authorities have forced trade from Canton and discouraged it at Macao, but the British do not retreat far. They move to outer anchorages, principally at Lintin, an island in the Canton gulf N.E. of Macao, and develop this as the principal depot for foreign ships, where trade continues to flourish until 1839 (1:47-8; 3:114-5; 5:20-1).
1821-1830	TRADE EXPANDS	The flow of opium becomes a flood. Revenues from opium surpass those from cotton within the India to China trade. Opium trade increases from less than 5,000 chests annually to 18,760 chests. The annual average import from the British is 10,114 chests, half of which is Malwa opium not controlled by the East India Company. Facing this competition, the British end their restraints and increase their imports to the capacity of the Chinese market in order to retain their monoply. Prices are also forced down. 1829-1831 are the critical years in the British government involvement (3:62, 80-112; 5-21-2).
1830-1839		Between 30,000 - 40,000 chests (1,841 tons) are now imported annually. Due in part to the coast trade, opium clippers now span the entire Chinese coast as the area around Canton becomes saturated with the drug (3:117-22). Led by Jardine, Matheson and Co., an English trading company, traders seek and find new markets and grow adept at avoiding official obstructions. The Chinese, lacking an adequate navy, cannot halt the trade. From the outer anchorages such as Lintin, native dealers in speedy well-armed boats called "fast crabs" or "scrambling dragons" pick up the opium stored in old hulks. Officials are bribed and bonding is avoided (5:22-32).
	USE SPREADS	The number of smokers is variously estimated as between 2 and 12 million, in a population of 350 million. Smoking is heaviest along the coast, along rivers, and in cities. Men aged 20-55 are the principal users, with government workers and soldiers heavily represented (5:32-36).
	SOCIAL/ECONOMIC EFFECTS	Commerce and finance are seriously handicapped by the drain of silver specie, China's main currency. Opium demoralizes the people, saps the energy of the army, and corrupts local gov-

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		ernment and police. Authorities in Peking grow alarmed. A great debate is touched off on how to handle the problem, with the party advocating a firm prohibitionist policy gaining power.
	CULTIVATION	By the middle 1830's, domestic cultivation and production begins to expand (20:30).
1831	CONFLICT GROWS	Restrictions on foreigners entering Chinese areas and on the use of Chinese citizens as employees of the foreigners, already severe, become even more stringent. Business dealings are hampered, stability of international commerce is greatly threatened (8:95-109). Hostility and conflicts escalate. Smuggling becomes uncontrollable.
1832	LEGALIZATION RECOMMENDED	Senior officials in Canton recommend to the emperor that the prohibition against opium be dropped and trade legalized: "Opium having become prevalent...vagabonds who smoke it to the injury of their lives and of their constitutions do so entirely from their own stupidity and are unworthy of regard. But the loss of wealth and waste of treasure are exceedingly great.... If at this time it were suffered to be brought in and publicly used...as a medicine, this would prevent the foreigners from raising the price" (8:115).
	RECOMMENDATIONS REJECTED	Emperor Tao-Kuang, opposed to opium smoking, rejects the suggestions to legalize the trade and censures the officials (6:67).
1833	BRITISH GOV. TAKES OVER TRADE	British parliament votes against the renewal of the East India Company charter for exclusive control of Chinese trade, due to dissatisfaction with the rate of growth of that market (1:58). From now on, representatives of the crown, not the East India Company, control the trade.
1834	CONFLICT ESCALATES	Lord Napier, Chief Superintendant of Trade of British Subjects in China, (8:122-3) is dispatched to China, instructed not to give offense but to try and persuade the Chinese government to end the Canton monopoly, open ports to foreign trade, and hopefully legalize opium. Napier only succeeds in irritating the Chinese authorities, who demand he leave Canton, and then ban all trade by British ships. Napier replies with a show of force, and a skirmish ensues between British ships and Chinese forts. Napier, suffering from a fever, retreats to Macao where he dies (8:123-32; 9:78).
1836	LEGALIZATION DEBATED	The failure of prohibition and the disastrous consequences arising out of the effort to enforce it lead Hsu Nai-chi, the imperial official in Kwantung, to recommend admitting opium legally, on payment of a duty. He wishes to stop "so vile a practice" but argues that prohibition does not prevent evils, but rather creates many more. Legalization would halt corruption; the more severe the edicts become "the more widely do the evils arising therefrom spread," and the greater the incentive to criminals to employ violence or corruption, or both. Teng, governor of Canton, also advocates legalization. Others disagree, stating that infraction of a law is no justification for its annulment, and recommending stricter enforcement of the anti-opium laws and severer penalties for foreigners (6:72-3; 9:81-2; 5:85-92).

CHRONOLOGY (Cont'd)

	LEGALIZATION REJECTED	The emperor orders Teng to move against the opium trade, and rigorous prohibition measures ensue.
1836-7	CONFLICT GROWS	Cap. Charles Elliot takes over Napier's post. He reports to London that the emperor is determined to suppress opium use and trade, and that it is time to send warships to protect British interests.
		Canton officials issue four separate edicts demanding departure of foreign opium receiving ships at Lintin. An imperial rescript announces that if they refuse to depart, all trade will be stopped.
1838-9	STRICT PENALTIES	Pressure against opium smuggling increases. The Chinese vigorously enforce the anti-opium policy. Executions and imprisonments occur. The severer penalties have some effect in suppressing local trade around Canton, though not elsewhere (5:104).
		The new, stricter measures take time to enforce, and the spread of opium continues, as does the silver shortage. Huang Chueh-tzu, concerned for the financial condition of the empire, suggests increasing the punishment for opium consumers. He argues that ending foreign trade would not check imports: bribes are too attractive, the coastline too long to patrol. Only if the number of smokers decreases will the demand and thus the imports decrease. He suggests capital punishment for smokers. There is nationwide discussion of Huang's proposals, and most recommend pressuring the suppliers.
	EXECUTIONS	The emperor decides to attack opium both at its source and along the path to consumers, and in 1939 promulgates a 39-article statute, stricter than all previous opium laws, stipulating execution for both smokers and dealers, including the foreign importers and traders (5:92-98).
1839	CONFRONTATION	Lin Tse-hsu, a leader among the prohibitionists in the debates, is sent to Canton as the new commissioner. Ordered to confront the foreigners with whatever force necessary to eliminate the opium traffic, he demands that they surrender all opium in their possession, post a bond, violation of which is punishable by death, and agree to cease further importation. War junks of soldiers assemble to back Lin's demands (5:94; 8:177).
		Lin places the foreign community under siege. Elliot is forced to surrender over 20,000 chests of opium, which are destroyed under Lin's supervision. The siege is lifted, and the British colony moves from Canton to Macao, then to Hong Kong (1:159. 175).
1839-42	FIRST WAR	The smuggling continues and cannot be checked. Skirmishes and friction increase. Elliot is adamantly opposed to signing bonds that subject British violators of the opium ban to the severe Chinese penalties.
		In 1840, the emperor responds to British resistance by declaring the British barred from commerce with China. London, instead, demands assurances of further trade, indemnification for the confiscated opium, and reparations. Gladstone condemns the British role in supplying opium but his opponents argue that if Indian opium is withdrawn, other countries will simply

CHRONOLOGY (Cont'd)

		take over. The British fleet arrives in Hong Kong, presses north and threatens Peking; Lin is relieved of his command.
1841	TRADE RESUMES	The flow of opium is not seriously impeded even by the military hostilities that continue. The Chinese, under Chi-San, the new viceroy, by some judicious diplomatic maneuvers and attempts at deception manage to avoid capitulation until 1942, when they are compelled to accept British terms. The opium traffic is back to normal (3:193-196; 9:85).
1842	TREATY OF NANKING	The defeat of the Chinese in the Opium War blocks their efforts to prohibit importation. The British, who had fought not only to support the drug traffic but to maintain and expand general trade to China, obtain their objectives in the treaty of Nanking: Hong Kong is ceded; the ports of Canton, Amoy, Foochow, Ningpo and Shanghai are opened to British trade; restrictions on Chinese tariff policies are instituted; Chinese monopolies are abolished; an indemnity of 21 million dollars is to be paid by the Chinese. China is now open to the West.
1842-52	TRADE DOUBLES	In the 10 years following the treaty, opium traffic to China doubles, with heavy participation by Chinese officials.
1843	BRITISH DEBATE	The Earl of Shaftesbury unsuccessfully attempts to introduce a resolution in the House of Commons to abolish the "evil" opium trade.
1844	WESTERN RELATIONS	In 1844, China concludes treaties with the U.S. and France, giving them general trading rights as well as freedom to engage in religious and cultural interaction.
1850	KUANG DIES; CONFLICT RESUMES	Tao Kuang, the emperor who tried and failed to end opium smoking, dies, and is succeeded by Hsieu-feng, who is opposed to the continuing authority of foreigners over Chinese life and the weakness of official resistance to opium activities. Gradually, general relations between China and the West worsen; the British protest Chinese arrogance and vilation of treaty terms.
1856-60	SECOND (ARROW) WAR	In 1856, matters come to a head with an incident off Canton, where Chinese soldiers board and arrest the crewmen of the Arrow, a Chinese boat flying a British flag. The British retaliate and begin the Arrow War, also called the Second Opium War although the primary problem was the clash of two cultures.
	TIENTSIN TREATY: LEGALIZATION	The British, with the help of the French who join in the war, defeat and force China to adopt Western patterns of commerce, and extend their powers to distribute opium in China. Even Russia and the U.S. are drawn into the negotiations. The treaty of Tientsin legalizes opium as well as opening up all of China to British and American Christian missionaries. Even before the treaty the Chinese acknowledge the de facto legality of opium by collecting taxes on it to pay for the war. Opium now becomes just another item of commerce subject to taxation and market maneuvering.

COMMENTARIES

The causes of the opium wars -- Owen, British Opium Policy in China and India (1934), pp. 167-168.

> "There remains the problem of whether the struggle which was to take place can be accurately described as an 'opium war.' Historians have repeatedly laid to rest the ghost of fighting a 'war to force opium on the Chinese,' but with singular persistence, it reappears in anti-opium pamphlets and undergraduate textbooks. The other point of view--that war, proceeding inevitably from Chinese exclusiveness, was the answer of the West to the contemptuous attitude affected by the East--has found ample support both at the time and subsequently. One of the statements most commonly quoted is that of John Quincy Adams, who, before the Massachusetts Historical Society, demanded that China play its commercial and diplomatic game according to western rules. For him the war was something of a missionary crusade to bring light to a government in darkness. As for the opium, 'This is a mere incident to the dispute; but no more the cause of the war, than the throwing overboard of the tea in Boston Harbor was the cause of the American revolution.'
>
> "Qualified writers, in general, have held that the struggle transcended a mere disagreement over opium, without necessarily subscribing to the...Adams dogma that China was bound to order her foreign relations in accordance with western usages. At the risk of merely repeating the interpretations of Morse, Sargent, and others, it may be asserted once again that, as far as the British were concerned, only in the light of its immediate occasion can the conflict be called an opium war. The most that can be said is that incompatible views of trade and diplomatic intercourse made a war probable; the opium question and the peculiar methods that Commissioner Lin applied to it made a resort to force inevitable. And the opium dispute condemned the British government to fight its battle seemingly on the most unsavory of issues."

The appeal of opium smoking in China -- Blum et al., Society and Drugs (1969), p. 51.

> "In China...opium was advertised as having an exhilarating effect and as being an aphrodisiac. Since its effects are more pronounced when it is smoked (it is absorbed through the lungs) than when eaten, the change in method of use provided an impetus for the rapid increase in its popularity--even if neither of the prime claims for it were found to be its major immediate effects or its long-term actual effects."

The opium war as a clash of two cultures -- Chang, Commissioner Lin and the Opium War (1964), p. 15.

> "In the broad sense, the Opium War was a clash between two cultures. One was agricultural, Confucian, stagnant, and waist-deep in the quicksand of a declining dynastic cycle. The Taiping rebellion was only a decade away, and the disintegrating economic, politicial, and social factors were already at work. The other society was industrial, capitalistic, progressive, and restless. When the two met, conflicts were inevitable, and the defeat of China was equally inevitable.
>
> "But the vital force that brought on the cultural conflict was Britain's commercial expansion. The friction that arose in the realms of diplomacy, law, and government was merely symptomatic of the basic problem--expansion versus containment. The opium trade was an indispensable vehicle for facilitating this expansion and the two could not be separated. Had there been an effective alternative to opium, say molasses or rice, the conflict might have been called the Molasses War or the Rice War. The only difference would have been a matter of time: in the hypothetical case, the major article of import being harmless, the lethargic Chinese would not have been alarmed into action so soon. The war could have been postponed, but not avoided."

Health, morality and economic aspects of Chinese opium concerns -- Chang, Commissioner Lin and the Opium War (1964), p. 95.

> "All the edicts of the Chia-ch'ing Emperor prohibiting opium were issued on the grounds that the drug had deleterious effects on morality and health. In the earlier years of the Tao-kuang period, the prohibition edicts were also inspired mainly by moral considerations (feng-su jen-hsin). It was in 1830 that the Tao-kuang Emperor for the first time mentioned money wasted on consumption of opium together with its injurious health effects. It was

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mainly the economic crisis that aroused the Chinese to take action against the import and spread of opium, it is true, but it would be a mistake to assume that the emperor would have been indifferent to the drug's admission in other circumstances."

A war to efface an unjust and humiliating act -- Fay, Opium War (1975), pp. 194-5.

"What, exactly, would England be fighting for? Not to open China to English manufactures, though there were great hopes in some quarters that ports of entry besides Canton could be obtained. Not to win China for Christ, though that might follow too. Certainly not to force opium down the throats of the Chinese--Palmerston (the British foreign secretary) was quite emphatic upon this point. 'Her Majesty's government,' he wrote in his November instructions (which mingled what was to be done with the whys and wherefores), 'by no means dispute the right of the government of China to prohibit the importation of opium into China' and to confiscate any that foreigners or Chinese might bring in. But the prohibition ought to be bona fide. It ought to be enforced, impartially, consistently, unremittingly. 'Traps ought not to be laid for foreigners'--and traps, alas, *had* been laid. The authorities [it is Palmerston speaking]had allowed the prohibition to lie dormant; they had let opium be smuggled in very large quantities and had even participated in the smuggling themselves; then quite suddenly they had turned upon the traffic and, unable to reach the outer anchorages, had laid violent hands on the English at Canton--though many of these, Palmerston was sure, had never dealt in the drug. They had made the English prisoners, Elliot with them, intending to bring about their deaths 'by the cruel process of starvation' and would have effected that dreadful object had not the prisoners purchased their lives with twenty thousand chests. This, then, and not the prohibition was the abominable aspect of the case, and for it England must have satisfaction.

"So Her Majesty's government prepared to go to war to efface an unjust and humiliating act, to recover the value of certain property plus expenses (to the twenty thousand chests Palmerston added the Hong debts due English merchants), and almost by the by to put England's relations with the Middle Kingdom on a new and proper footing."

The failure of Chinese policy -- Inglis, Forbidden Game (1975), pp. 80-85.

"The failure of the prohibition policy, and the disastrous consequences arising out of the effort to enforce, had attracted the attention of some of the teachers at an academy which had been founded in 1820 in Canton. Perhaps because it had not settled into the traditional academic grooves, the possibility of legalizing opium imports, subject to a duty, had been discussed and among those influenced by the arguments in favor of that course was Hsu Nai-chi....

"Hsu did not dispute that 'so vile a practice,' and the evils arising out of it, should be stopped. His argument [in the 1836 memorial to the Emperor] was that prohibition not merely had failed to stop the evils, but had created many more; and the severer the interdicts against it became, [the more widely do the evils arising therefrom spread....] the greater the incentive to criminals to employ violence, or corruption, or both.

"In its general approach, the memorial was remarkably similar in its line of argument to Bathurst's in the House of Lords nearly a century before [in regard to gin, see persp. 14]. analysis went a little deeper in its recognition of why the severity of a penal code, so far from helping in the effort to suppress a drug, must make it easier for the importer. As he himself was not at risk, the penalties did not matter to him. At worst, all that he had to worry about was having to pay out more in bribes. But even that could be, in the end, to his advantage. The higher the payment offered, the easier it became to find officials who would succumb" (pp. 80-81).

"[The first Opium War] represents a classic example of the limitations of honesty, integrity and assiduity in carrying out a campaign to suppress the traffic in a drug....

"Lin found himself unable to check the smuggling. After the destruction of the opium, he intended to have a purge of the customs officials; but too many of them, he found, were implicated in the traffic....And Lin was finding it hard to get informers, because they were no use to him unless they knew the traffic--in which case they would work for the smugglers, who could afford to pay them more.

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"What was being demonstrated, for the first time on such a large scale, was the impracticability of prohibition as a way to suppress the traffic in a drug, particularly a drug as addictive as opium. Addicts, who felt they had to have it, would pay whatever the smugglers charged....

"...His [Lin's] mistake--as the Censor, Pu, had realized--lay in imagining that the threat of closure of the legitimate British trade would suffice to bring the opium traffic to an end. It mattered little to the British merchants that instead of picking up their tea at Canton, they had to leave the Americans to collect it there, and receive it from them at Hong Kong. What was vital was that the flow of their imports of opium should continue; and Lin had been unable to stop it" (pp. 82-85).

The failure of Chinese policy -- Archibald, Alcohol and drugs: Government responsibility, in Whitney, ed., World Dialogue (1970), pp. 244-245.

"The history of opium use in China is a classic story of the impotence of state edicts when faced with strongly opposed economic interests. For 130 years, beginning in 1729, the opium trade into and within China was illegal, yet it expanded continuously. By 1859, it had been legalized. At one point, India's exports of opium to China provided 14 per cent of the official revenue of British India. The twentieth-century accomplishments of organized illegal drug trade seem to be relatively modest when compared with those of the British East India Company, which was able for more than a century to bribe the way for its product into a huge country which officially excluded it.

"Only the rise of moral revulsion in Britain itself (about its interest in the export of opium from India) made it possible eventually for China to start, early in this century and at great cost, a program of tapering off its population from massive dependence on opium....

"Societies tend to view things like drugs in black and white terms. Yet truth is frequently found in various shades of grey. Once a psychoactive substance is present in a society and its use is known and enjoyed, it is extremely difficult to eliminate its use altogether. All that usually can be done is to reduce the level of consumption to the point where the resulting damage is at or below the level that the society is prepared to tolerate.

"At the same time, the methods used to reduce the use cannot themselves be intolerable to the society. For example, the early Chinese edicts calling for strangulation or decapitation of opium sellers were simply not enforced. The alcohol prohibition laws of the 20's in North America were not so violently repressive, but because they lacked popular support they were enforced with a noticeable lack of enthusiasm."

The failure of Chinese policy -- Blum et al., Society and Drugs (1969), pp. 51-52.

"In China, total prohibition alternated with heavily taxed legal importation. The former spawned a number of smugglers--'scuttling crabs and fast dragons'--plying rivers and coast, while the latter came under the jurisdiction of frequently corrupt officials whom the government designated as wholesalers. The first edict against opium was that of the emperor in 1729; as the boom developed, nevertheless, the emperors were made aware of its cost in terms of a disastrous revival in the balance of payments, which, due to tea and silk exports, had favored China. The official imprecations--'a devilish foreign substance'--no more discouraged traffic in the mid-1800's than had the first imperial prohibitions. Laws continued to be passed by the Chinese as control efforts, but did not affect opium consumption or importation. What happened was comparable to prohibition in the United States with the added fillip that the Chinese were quietly encouraging opium-poppy production internally, but their morphine content remained inferior to the Indian variety. Chinese resistance to imported opium led to the two Opium Wars with England in 1842 and 1858, which enabled English merchants to continue their profitable trade."

The failure of Chinese policy -- Lowes, Genesis of International Narcotics Control (1966), p. 24.

"In 1683 Emperor Kanghi took Amoy and captured Formosa and the country around Amoy and in this way the Imperial government came into direct contact with the new vice. His successor, who succeeded in 1723, issued in 1729 the first anti-opium edict prohibiting the sale of opium and the opening of opium-smoking houses. This step was taken because the government was confronted with a dangerous social evil of an alarming kind. Eye-witness descriptions

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of the physical effects of opium-smoking as displayed in the shrivelling up of the features and an early death, produced a deep impression in Peking.

"This prohibition, the first in an 180-year long series of draconian edicts, is interesting to our study for two reasons. First, because, like all the succeeding ones except the last... it was being issued by a society and in an age when edicts were made to be disobeyed. Hence, it was virtually ignored. If a more realistic goal and moderate sanctions had been set, something might have been achieved. But the penalties prescribed in such a loosely organized society could hardly have been taken seriously. It was decreed that masters of opium shops were to be punished by strangulation after a few months' imprisonment. Later edicts even prescribed decapitation, a far more serious penalty because it meant that the victim passed into the hereafter with a mutilated body. The assistants of the opium shop keepers were to be beaten with a hundred blows and banished 1,000 miles. Sellers were to bear the wooden collar for a month and be banished to the frontier.

"In short, everyone connected with the crime was to be punished except the smoker. Herein is the second point of particular interest, because the same rationale pervades current penal jurisprudence in North America, which has a very serious social problem of addiction to opiates..."

Effects of the British monopoly -- Lowes, Genesis of International Narcotics Control (1966). pp. 32-33.

"The organization of the monopoly by the British in Bengal and the linking of opium production there to the revenue of the country, created towards the end of the eighteenth century, the situation from which the Chinese problems of the nineteenth century derived--problems which could only be resolved in the twentieth century. For, although the opium had been in the Far East for a long time before the Europeans arrived, it was they who organized the opium industry on a large scale. They could and did claim with justice that they had not brought opium to the Far East, but it was their talent for organizing that made it a world-wide problem.

"When the British conquered Bengal, they found a badly organized system which could not engender too much evil; at the close of Warren Hasting's administration, a State monopoly had been set up efficiently operating and producing a revenue which was an increasingly essential feature of the Indian fiscal system."

Opium's appeal to the Chinese -- Singer, The choice of intoxicant among the Chinese, Brit. J. Add. (1974), pp. 259-266.

"In China consumption of opium by a large proportion of the population led to its becoming a tradition, a social activity interwoven into the ideational systems, customs and practices of the culture. Opium smoking became a ritual and an 'art' and gained a measure of social acceptance if not respectability. It became commonplace to use opium to facilitate social intercourse in weddings and in funerals; to solve domestic problems, for example, for rich families to keep sons at home and away from gambling, or to keep widows away from trouble; to improve bodily functions, particularly to prolong the secual activity; and as a panacea for a multitude of physical ailments. Observers have generally accepted therefore that the force of tradition which opium acquired became an important factor in its continued use later on. The question remains why its use should have become traditional in the first place, and why it did not do so in the West.

"...The available data indicate that the Chinese prevalence pattern in comparison with the Western is one of moderately low alcoholic consumption and alcoholism and very high narcotic consumption and dependence. Although this pattern is not identical with that of the rare alcoholic and very common narcotic dependence hitherto assumed it remains significantly different from the pattern in the West to require explanation...

"According to Hsu (1955) the Chinese because of their way of life will choose narcotics rather than alcohol and other stimulants. The situation-centred Chinese, whose way of life directs the individual to seek harmony with the environment, finds more satisfaction in drugs like opium which enables a person to retreat into a state where conflict with the environment is reduced further and the likelihood of giving vent to individual whim is even more remote. The individual-centred Americans, whose way of life is aggressive and uncompromising, are

COMMENTARIES (Cont'd)

> attracted to drugs (or intoxicants) which aggravate their tendency to follow personal predilections, the extreme of which is completely unrestrained individual freedom...
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> "The traditional factor determining choice of intoxicants derives from traditional ideology which supports individual and societal behavioural patterns such as acquiescence, moderation, propriety, conformity and intellectual control, and family patternings such as the patriarchal system and the strong family authority. Cultural beliefs and expectations, and historical events leading to easy availability of opiates for a long period, also play their parts.... Cultural rituals in opium use, particularly in smoking opium, by limiting the harmful social and physical consequences, probably contribute to its social acceptability and widespread use."

The Chinese preference for opium over cannabis -- Li, Origin and use of cannabis in Eastern Asia, in Rubin, ed., Cannabis and Culture (1975), pp. 59-60.

> "The adoption of the introduced substance opium in contrast to the lack of general use of the indigenous cannabis, can be explained on a cultural basis. Opium is an Euphorica, a sedative of mental activity. Cannabis, on the other hand, is a Phantastica, an hallucinogenic drug that causes mental exhilaration and nervous excitation. It distorts the sense of time and space...
>
> "These effects were duly noted by Chinese physicians at least from the second century A.D. or earlier. They were in every respect inconsistent with the philosophy and traditions of Chinese life. The discontinuation of the use of cannabis by the Chinese can perhaps simply be referred to its unsuitability to the Chinese temperament and traditions...
>
> "Despite the risk of oversimplification, we can conclude that Chinese culture, in conditioning the reflexes of the Chinese mind, is characterized by a dislike of metaphysics and its commonsense view of morality. The traditional Chinese philosophy of life is centered on humanism; it thus emphasizes in particular interpersonal relations. Compounded by its universally adopted doctrine of the Mean and its strong social system based on the family, these cultural influences seem to provide sufficient background for the universal failure to adopt a drug which causes hallucination and fantasy."

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23

Opium

India

800-1970

BACKGROUND

The habitual use of stimulant, sedative, and euphoric drugs was probably prevalent in India before any other country of the modern world. Particularly because medical facilities were poor in medieval India, sedative drugs such as opium were extensively used as household remedies. But almost all the diseases for which opium was used were of a minor character and the drug was taken in small doses, although habituation did occasionally result. This medical use of opium was soon expanded and complicated by social and religious use. To many, indulgence in opium became compulsory on such occasions as marriages, deaths, and social gatherings. Some religious sects also took various drugs to assist in freeing the mind from worldly attractions (2:21-2). To meet this demand, opium was extensively cultivated in India, and it early played an important role in the area's economy, a role that expanded under the British with the growth of the Chinese opium trade.

Despite the pervasiveness of opium in Indian history, its use never became as extensive as in China, nor did it engender such extreme concern. The differences between these two countries warrants considerably more exploration, but it appears that India had less of a problem because opium use was tied principally to medical and quasi-medical purposes and governed by a traditional system of social controls over usage. Recreational opium smoking was never as prevalent in India. Furthermore, in India the reaction to opium was not affected by distrust of foreign substances.

The history of opium use in India also warrants attention because contemporary evidence suggests that India has managed to implement one of the world's most successful campaigns to limit the drug's cultivation and use.

CHRONOLOGY

c.800	INTRODUCTION	The earliest estimate places the introduction of opium into India by Arab traders before the time of Mohammed. More likely, it came to the west coast of India with Muslim traders in about the 9th century A.D. (4:301). In the period of Muslim rule, opium use, particularly as a medicine, spreads rapidly. It is extensively cultivated, eaten, and drunk by all classes of people, and even given to infants to quiet them (2:21; 4:301).
c.1000	USE SPREADS	Evidence suggests that opium is used by the rulers of India as an indulgence and by the common people for a multitude of purposes: (1) as a household remedy; (2) to give courage to soldiers; and (3) as an aphrodisiac (5:3).
1310	BAN	Allauddin Khilji imposes total prohibition on the city of Delhi (4:301).
c.1500	USE SPREADS	The earliest western record of opium as a product of India is made by the traveler Duarte Barbosa, who observes that the Indians begin eating opium in small quantities as children and increase the quantity consumed until "if they leave off eating it, they will die immediately." Other explorers substantiate his findings. Don Alfonso de Albuquerque writes to the king of Portugal that the Indians are lost without their opium to eat (3:30; 5:2-3). During this period, in Rapjputana, the customary greeting to visitors is, "Take your opiate." In India, an agreement ratified by all contracting parties eating opium together is considered inviolably binding. Even the seals with which contracts and other legal documents are stamped bear the inscription "Take a draught of opium" (11:373).

1524	MOGHULS	Babur (1524-1530), a Turk of Mongolian descent, conquers India from the Punjab to Bengal and founds the first Moghul dynasty. Poppy cultivation and the sale of opium become state monopolies; opium is extensively cultivated on the west coast at Cambay, and Malwa and becomes an important article of trade with China and the East (7:3).
1556+	CULTIVATION AND USE SPREAD	During the reign of the great Moghul emperor Akbar (1556-1605), poppy land is a regular source of revenue to the state and areas of production are recorded in the Institutes of Akbar (5:5). Most of the court, including Akbar, uses beverages combining opium. Testimonies of 16th century travelers confirm the magnitude of the problem of opium eating, but there is no mention of opium smoking (1:7; 5:301).
		In 1563, Garcia d'Orta (1501-1568), a physician who sailed to India in 1554, observes: "Although they take it in small quantity, it is a merchandise in great demand everywhere it is consumed, for if they do not take it they are in danger of death, and this is the reason why in the countries I am talking about it is very expensive, they always try to keep a supply of it (as they keep wheat for May.) Those who take it go about sleepy, and they say they take it so as to dispel cares" (6:272-3).
		In 1689, Kaempfer, in Amoenitates Exoticae (1712), writes that the use of opium is common among the Persians and Indians and endows them with "serenity, hilarity, and tranquility."
c. 1707	MOGHUL COLLAPSE; SMOKING OUTBREAK	The Moghul Empire collapses following the reign of Aurangzeb (1658-1707) and control of the opium trade is appropriated by merchants in Patna (7:3). Throughout the 18th century those who manage coolies give them the drug to ward off the cold and, as it is believed, allay fatigue. A brief period of opium smoking among "easy-going, well-to-do sections of society" occurs, but it soon falls into disrepute (2:22). Although tobacco smoking was introduced after the 16th century, there is no evidence as in China that opium smoking became an outgrowth of tobacco smoking (1:14).
1757	BRITISH EAST INDIA COMPANY	The opium monopoly passes into the hands of the British East India Company; the British try to popularize the use of drinks and drugs to increase revenue (4:302; 7:3).
1773	STATE CONTROL	The British Governor of India, General Warren Hastings, brings the opium trade under government control; strict controls over cultivation and production are exercised; unrestricted cultivation and production are prohibited (7:3). Hastings declares that opium is a pernicious article of luxury which ought not to be permitted and "which the Government should carefully restrain from internal consumption."
c. 1775-1800	USE PATTERNS	Use begins to decline, but there is still considerable consumption. Opium is generally used in a crude form and mostly eaten; smoking is less common (1:7; 2:21).
1813	POLICY STATEMENT	The Bengal Resolution regarding opium consumption is passed, inaugurating a policy of restricting the habit of opium-eating by obtaining the "maximum revenue from the minimum consumption." The government declares it is desirous of countenancing only to the narrowest extent possible a habit which it finds impossible to eradicate (1:1).

CHRONOLOGY (Cont'd)

1857	INDIAN REVOLT	A bloody uprising occurs against British power in India.
1858	CROWN TAKES OVER; CULTIVATION EXPANDED	In 1858, the "Act for the Better Government of India" transfers the reigns of sovereignty from the East India Company to the Crown. The opium system remains the same, and the opium revenue is now the third largest increment to the Indian treasury (after that of land and salt), producing over 1/7th of the total income. A period of "mad expansion" of cultivation begins, with the government seeking to regulate and adjust provisions so that the largest possible net revenue is gained (5:280-4).
1858-81	MONOPOLY REPEAL ATTEMPTED	On four occasions proposals are made to abolish the opium monopoly and substitute an export tax on the drug. While there is no question of prohibiting the drug, it is hoped that this will remove the embarrassing role of the government as a drug merchant and still raise revenue (5:296).
1893-95	ROYAL OPIUM COMMISSION FINDING	As a result of the activities of the British Society for the Suppression of the Opium Trade and other critics, the British Government of India appoints a Royal Commission to inquire into the prevalence of the opium habit. The Commission reports that the smoking of opium and its use as a beverage are rare. Oral consumption by adults and administration to children for medicinal purposes, which apparently were ancient habits, is not widespread and, as a rule, moderate; excessive use is an exception condemned by public opinion. The reasons given for use are: (1) man's universal tendency to take some form of stimulant to comfort or distract himself; (2) the widespread popular belief in the medicinal or quasi-medicinal efficacy of the drug; (3) religious and ceremonial usage (1:2).
	COMMISSION RECOMMENDATIONS	The Commission concludes that it would be impossible to limit opium use just to medicinal purposes because it is too difficult to distinguish between medical and nonmedical use; it would also be too difficult to effectively enforce prohibition, even those not addicted would not approve of this unnecessary interference. Furthermore, prohibition would bring an increase in alcohol consumption. The Commission's recommendations become the official government policy. (On the Commission and British attitudes towards the government's policy toward opium, see persp. 24.)
1909	INTERNATIONAL CONCERN	The opium problem is presented at successive international commissions beginning in 1909.
1911	POLICY STATEMENT	The British Government publishes a dispatch on its policy: "The prohibition of opium eating in India, we regard as impossible, and any attempt at it is fraught with the most serious consequences to the people and the Government. We take our stand unhesitatingly on the conclusions of the Royal Commission which reported in 1895, viz., that the opium habit as a vice scarcely exists in India, that opium is extensively used for nonmedical and quasi-medical purposes, in some cases with benefits, and for the most part, without injurious consequences, that the nonmedical uses are so interwoven with the medical uses that it would not be practicable to draw a distinction between them in the distribution and

CHRONOLOGY, Cont'd

		sale of the drug, and that it is not necessary that the growth of the poppy, and the manufacture and sale of opium in British India, should be prohibited except for medical purposes. Whatever may be the case in other countries, centuries of inherited experience have taught the people of India discretion in the use of the drug, and its misuse is a negligible feature in Indian life (1:3).
1924	CONCERN GROWS; CONGRESS OPPOSITION	The public begins to be apprehensive over opium use; a series of articles appear and an unofficial inquiry (which supports the Royal Commission) is held. The All-India Congress Committee, formed in 1885 to work for self-government, and Mohandas Ghandi pass a resolution that the opium policy of the Government of India is contrary to the moral welfare of the people.
1925	CRITICISM MOUNTS	Increasing criticism of the British Indian Government's opium policy occurs. The Assam Provincial Committee of the Indian National Congress appoints an inquiry committee to study the opium habit, its prevalence and effects (1:29).
1928	INCREASE REASSESSED	Research indicates that opiate use is comparatively rare and less than previous publications would have indicated, although in some cases it is still very high. Only a small fraction of the population uses it habitually and there appears to be a decrease occurring (1:8).
1937-8	LOCAL CONGRESS PROHIBITIONS	In 1937, the Indian National Congress comes to power in some provinces and begins to prohibit opium use locally; plans are made to introduce total prohibition gradually throughout all of India (4:302). In 1938, Congress comes to power in Assam, adopts and puts into practice the recommendations of the Assam Provincial Committee. The state government stops the sale and use of opium completely in the three most heavily affected districts, even though this means considerable loss of revenue. The experiment includes propaganda measures, public meetings, census of registered and unregistered addicts, and free medical treatment centers. Analysis includes factors responsible for habit, intensity of addiction-withdrawal symptoms, and the relationship between age, dosage, duration and success. Later, it is found that 40 percent of addicts are cured, 50 percent reduce their dosage, and 10 percent show no response (2:29-30).
1940	DECLINE CONTINUES	The period of 1920-40 shows the greatest decline of use to date (1:8).
1944	PROHIBITION URGED	The U.S. Government suggests that the British Government give immediate consideration to stopping the use of opium for other than strictly medical and scientific purposes. In consultation with the Government of India, His Majesty's Government replies that every effort will continue to be made in the future, as in the past, to strictly control the production of opium in accordance with treaty obligations, and explains the circumstances under which opium eating is tolerated in India (1:4).
1946	SMOKING PROHIBITION	Taking note of pressure, the Government of India prohibits the smoking of opium (1:4). Congress ministers resign during World War II and prohibition efforts are discontinued.

CHRONOLOGY Cont'd

1947	PROHIBITION POLICY	India achieves independence; Congress revives its policy of prohibition, declaring that the Indian policy is now prohibition of opium production except for medical and scientific use. Opium Prohibition committees are set up to mobilize public opinion against the habit, to enlist cooperation in assisting the official staff, and to provide deterrent punishment in opium smuggling cases. Treatment centers are set up where addicts (mainly of lower income) are brought by persuasion and treated free of cost.
1948	PRODUCTION CUTS	The government requests a 10 percent annual cut in production (1:4).
1949	10-YEAR PLAN	The Constitution of India proclaims "the State shall endeavor to bring about the prohibition of consumption, except for medical purposes, of intoxicating drinks and drugs which are injurious to health." An All-India Opium Conference is held and draws up a 10-year prohibition plan (7:3; 4:302-3).
1950	CONTROL CENTRALIZED	Control of cultivation and manufacture of opium throughout all India passes into the hands of the government, which sets up a Narcotics Commission as a central organization to unify and rationalize the system of control.
1953-54	USE DECLINES	Between 1948-49 and 1953-54, a reduction of 45 percent in consumption occurs, primarily because of the decrease in production and the increase in price (1:8).
1958	REGISTRATION BANNED	Registration of addicts is banned except under exceptional circumstances (7:11-12).
1959	PROHIBITION	The sale of opium is totally prohibited; oral consumption is prohibited except for small amounts consumed by registered addicts on medical grounds.
1960's	CULTIVATION CONTROLS	Policy is guided by international obligations to restrict production to the quantity required for export for medicinal purposes and for consumption within India. Cultivation is confined to Uttar Pradesh, Madhya Pradesh, and Rajasthan where proper control over production can be exercised. A highly organized system of licensing is established that aims at eliminating undesirable cultivators and unproductive tracts by progressively stepping up the minimum qualifying yield for purposes of determining the priority for a license. Cash incentives are given to discourage selling opium on the illicit market.
	SMUGGLING CONTROLS	The Narcotics Commissioner is in charge of controlling cultivation from the time the seed is sown until the opium is collected and sent to factories. Using organized checks, illicit drug traffic is reduced to negligible levels and is almost wholly domestic in character (7:4-9).
1963-70	USE AND CULTIVATION DECLINE	Area under cultivation is reduced by approximately 25% and cultivators by 60% (8:57). Oral consumption decreases from 150 tons in 1950 to 2.5 tons. The number of registered addicts decrease from 200,000 in 1956 to 124,904; opium smokers decline from 2,504 in 1953 to 1,822 in 1963. They are mostly age 50 and over; the present generation does not appear to be taking opium (7:3, 12). A survey taken in the 1970s at Delhi University finds no cases of opium use (12:53).

COMMENTARY

India vs. China -- Blum et al, Society and Drugs (1969), pp. 47-48; 50-51.

"At no time has India been described as having an opium problem in the sense that China did, in spite of the fact that India has been and is an opium-producing country and one in which access to and use of the drug have been widespread. Official reports may well be suspect in terms of accuracy, but we do take them to reflect at least the level of concern if not of use, assuming the accuracy of observer accounts. A considerable mystery remains as to why the Chinese instead of the Indians came either to decide abuse was present and/or to suffer more adverse effects in fact. Poverty, nutritional deficit, and social disorganization cannot be differentially invoked as explanatory concepts. As will be seen, the role of local merchants, local government, and trading nations did differ. In India, merchandising locally was directed to traditional medical and folk medical use and, secularly, to organized social or group use; licit distribution was limited to forms suitable for eating rather than for smoking. International trading was directed toward China (and now Persia and the United States illicitly) rather than internally. Nowadays, opium for eating is still legal, but the sale of opium for smoking and the existence of smoking dens are prohibited. Only registered addicts may smoke legally. What accounts for the Indian/Chinese differences? Was it the Indian advertising and merchandising patterns, coupled with government restrictions on kinds of preparations legally available and kinds of settings tolerated for use, plus official Indian government support for production and sales (and implicit use), as contrasted to official Chinese disapproval on economic-political-attitudinal grounds? This remains an open and interesting historical question" (pp. 47-48).

"China, the importing nation with its millions of poor addicts, is to be compared with India, the exporting country. Once opium smoking began, Chinese use was personal or social--that is, unregulated, informal, and nontraditional rather than medicinal as such. In India, on the other hand, medicinal use was paramount after opium's introduction by the Moslems, and opium remains an important feature of Ayurvedic medicine. There are Indian references to its use to keep political enemies out of circulation (doping them up) or indeed to keep profligate sons from gambling and wenching (R.N. Chopra, 1955) by sedating them. But most applications seemed to have been for insomnia, nervousness, upset stomach, diarrhea, rheumatic pains, and the like. Infants left by their mothers were (and are) given opium to lull them. It was advertised as a prolonger of sexual intercourse and for refreshing the weary. India, with this traditional orientation, never attempted countrywide bans. It has sought to reduce its use and availability. R.N. Chopra (1933, 1934, 1935) has described those who suffer ill effects as coming from lower economic brackets, especially those undergoing the abstinence syndrome. As with many other descriptions of untoward effects, those of withdrawal are said to be far more noticeable than those of sustained use. In any event, at the same point in time, two nations with an immense population of poor responded quite differently to opium; in one it was smoked and became a problem; in the other, use remained, for the most part, traditional and no problem or problem orientation appeared" (pp. 50-51).

Opium smoking vs. opium eating -- Chopra and Chopra, Treatment of drug addiction: Experience in India, Bull. Narc. (1957), p. 24.

"The experience in India is that the habit of opium smoking is much more difficult to eradicate than opium eating. Fortunately, owing to enforcement of very strict regulations, the habit of smoking opium has practically disappeared. There appears to be little doubt that an opium smoker is much more attached to the drug than an opium eater. It would appear that, although smaller quantities of the alkaloids are absorbed (most of them must be destroyed by the heat produced), the absorption is very rapid through the large surface of the capillaries of the lungs, and the effects are sudden and more intense, resembling those of an injection of morphine. The treatment of opium smoking has not been properly worked out in India. Some authorities allow the patient to take the drug by mouth and gradually cut down smoking. Once eating is successfully substituted for smoking, the addict becomes more amenable to treatment."

COMMENTARIES (Cont'd)

The quasi-medical use of opium in India -- Chopra and Chopra, Quasi-medical use of opium in India and its effects, Bull. Narc. (1955), pp. 17-18.

> "It is obvious that the underlying causes leading to the use of opium by the people of India, in the large majority of cases, were belief in its quasi-medical properties. Owing to inadequate facilities of medical relief in the past, it is not surprising that the wonderful pain-relieving and other qualities of this drug led people to make use of it in some form for the relief of various ailments. During the last decade, however, medical relief to the population both in the urban and in the rural areas in most of the states has been greatly extended. This has led to a significant decrease in the consumption of opium all over the country..... Now that opium is no longer being made available for quasi-medical purposes and its price has been further increased, it is expected that addiction to the drug will rapidly decline and will soon cease to exist as a public-health problem. The few areas throughout the country where the use of opium is still comparatively widespread are being energetically dealt with by means of stricter enforcement of legislation, more extensive educational propaganda and provision of further medical facilities. The problem of the consumption of opium in India as it existed before 1948 is rapidly disappearing."

The Indian opium addict -- Chopra and Chopra, Quasi-medical use of opium in India and its effects, Bull. Narc. (1955), p. 21.

> "Opium addicts in this country are not liars or moral wrecks as has been described by some observers. Some of our addicts were upright, straightforward and self-respecting individuals. We have observed that moderate consumers of the drug and a majority of those taking even large doses are generally inoffensive to society. It is only when the excessive use affects the addict physically and morally that he resorts to dishonest practices, but he seldom commits acts of violence. The ordinary types of opium addicts met with in this country are not mentally defective, and the habit does not lead to insanity or serious nervous disorders needing custodial care. They are not dangerous to society, but undoubtedly many of those taking large doses are useless to the community. The opium addicts in India are not much objected to by the people at large, but persons taking large doses of drug, and those who smoke opium are shunned by respectable citizens lest their children and youths should acquire the habit by force of example. The harm done by an opium addict is mainly confined to himself and does not affect society."

The success of contemporary control methods -- Smart, Effects of legal restraint on the use of drugs, Bull. Narc (1976), pp. 56-7.

> "One of the most impressive narcotics control programmes has been conducted in India (Kohli, 1966). After achieving independence in 1947 the Indian Government decided that opium poppy cultivation for other than medical reasons should cease within 10 years. A large programme was launched in which the area under cultivation was reduced by about 25%, the number of cultivators by 60%, with licenses issued to each. Cash incentives were given to cultivators to discourage their selling opium on the illicit market. Increased efforts to stop trafficking also occurred."

The success of contemporary control methods -- Kohli, The story of narcotics control in India (opium), Bull. Narc. (1966), pp. 3-4.

> "Having ratified all the international conventions on narcotics and being one of the major opium-producing countries in the world, the government of India has made considerable headway in the matter of prohibition of narcotic drugs including opium and cannabis. The All-India Opium Conference held in 1949 decided that within a maximum period of ten years the consumption of opium for other than medical and scientific purposes should be totally prohibited throughout the country....As a result of the above decisions, oral consumption of opium for non-medical purposes has since been prohibited throughout the country with effect from last April 1959, barring however, a small quantity of opium consumed by registered addicts on medical grounds. [This is reflected in a decrease in oral consumption, the number of registered addicts and opium smokers]...What is significant is that the new generation is not taking to opium. It is therefore reasonable to expect that at a not too distant date opium addiction would be a thing of the past.

COMMENTARIES (Cont'd)

> "The Government of India's policy in regard to cultivation of poppy is guided by her international obligations to restrict production of opium to the quantity actually required for export for medicinal purposes as well as for consumption within the country. At present cultivation of poppy is confined to the traditional poppy-growing tracts....This, combined with a highly organized system of licensing, which is based on a progressively increasing minimum yield for qualifying for a license, has induced the cultivators to tender maximum yields to the Government. Through the operation of these licensing principles, and also payment of cash awards to cultivators, the Government has been able to step up the average yield....Taking possession of the opium from the cultivators soon after the harvest through the system of mobile weighments, and organized checks in and around the growing areas, have also contributed largely to stopping the illicit flow of the drug from such areas to the outer world."

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24

Opiates
Britain
1800-1917

BACKGROUND

In the 17th century, the Englishman Thomas Sydenham, one of the founders of clinical medicine, praised opium as God's greatest gift to humanity for the relief of its suffering. In 19th century Britain and America, this was still the predominant opinion of both doctors and the public. Most doctors still thought of it not as a dangerous addictive drug but as a useful analgesic and tranquilizer, and they prescribed opiates liberally; there were few other therapeutic agents then available. Patent medicines and opium preparations such as Dover's Powder were readily available without restrictions. Indeed, laudanum (opium mixed with alcohol) was cheaper than beer or wine and readily within the means of the lowest-paid worker. As a result, throughout the first half of the 19th century, the incidence of opium dependence appears to have increased steadily in England, Europe, and the United States. Working-class medicinal use of opium-bearing nostrums as sedatives for children was especially prominent in England. However, despite some well known cases among 19th-century English literary and creative personalities--Thomas De Quincey (whose Confessions of an English Opium Eater was a sensation when it was published in 1820), Byron, Shelley, Coleridge, and Dickens--recreational use was limited, and there is no evidence that use was so excessive as to be a medical or social concern. Awareness of habituation and of the diffidulties in overcoming it were growing, but opium use was seldom considered inimical to long life or good health, at least among Westerners. Reports of the adverse consequences of opium habituation in China were attributed to a peculiar weakness of Oriental peoples. A far more serious public health problem in the view of many contemporaries was the volume of alcohol consumption.

Between the mid-19th century and the early years of the 20th century, a more critical attitude toward the dangers of opium did begin to develop as a result of a number of factors: (1) the availability of the alkaloidal extract morphine (isolated in 1803) which was more powerful in action and more convenient to administer; (2) the development of the hypodermic needle; (3) greater scientific advances in precise identification and analysis of drug effects; (4) the attention generated by the debate over the opium trade and confessions such as De Quincey's; (5) the growth of the temperance movement; (6) increased mass production of opium preparations; (7) a greater awareness of the spread of use; and (8) increased international pressure, particularly from the United States, for domestic controls. By the end of the century there was an intensified awareness of addiction as a distinctive medical and social problem; previous casual observations of tolerance, dependency, and abstinence began to be integrated into a unified concept of addiction. Still, as late as 1895 the Royal Commission on Opium concluded that reports of the adverse consequences of opium use were exaggerated and saw no need to end the opium trade. It was not until 1917 that the trade was ended and not until 1916 that a need was felt for special domestic drug control measures in England. Even then the primary concern was over an outbreak of cocaine use; opium was included in the controls not because of a perceived problem but in order to end the Indo-Chinese opium trade and to prevent smuggling from Great Britain and to China. While the climate was changing, concern over opium use in England was still limited.

CHRONOLOGY

1800-20s	INCREASED USE; CULTIVATION	Domestic opium cultivation is encouraged by increased opium use, along with rising prices and problems with adulteration. It declines after the 1820s, but there does not appear to have been any call for controls (11).
1822	DE QUINCEY	Thomas De Quincey publishes Confessions of an English Opium Eater, focusing attention on opium addiction as never before. (9; 10). Other opium-using writers include Coleridge, Swinburne, Browning and Crabbe, most of whom first used the drug for therapeutic purposes.

CHRONOLOGY (Cont'd)

1834-50	FENLAND USE	An awareness grows of endemic opium use among [illegible] peoples, who both tolerate and successfully control [illegible] use by informal social mechanisms. Use is particularly widespread among poorer classes, agricultural populations, the inhabitants of small hamlets and isolated farms, and women and babies. Contemporary observers attribute initiation of use for the rheumatic pains which plague almost everyone in this low-lying, marshy area (12).
1839	CONCERN GROWS	Opium and its preparations are responsible for more premature deaths than any other chemical agent. Opiates account for 186 of 543 poisonings, including no fewer than 72 among children (1:168).
1839-60	OPIUM WARS; ENGLISH USE INCREASES	England fights two wars to force China to adopt Western patterns of commerce and diplomacy and to protect its lucrative opium trade (see persp. 22). The opium trade is legalized in 1860 with the Treaty of Tientsin. The British consider opium the Chinese whiskey and as legitimate a product as alcohol, tea, or coffee (2:306). The opium habit becomes popular in England; every medical authority agrees the drug habit is spreading (3:3). Still, opium use does not approach the volume of alcohol consumption.
1844	URBAN USE WIDESPREAD	Engels (The Condition of the English Working Class, 1844) writes that the use of opium-bearing patent medicines is widespread in the great cities and industrial towns where women "dose their children" with the medicine in order to keep them quiet and because they believe it will strengthen them (4:177).
1851	PUBLIC HEALTH	An international health conference is held at Paris, promoting the idea of identifying, quantifying, and disseminating information about diseases (6).
1857	FIRST CONTROL ATTEMPTS	In the 1850s, the use of poisons, often opiates, in a series of murders arouses public concern. The national press clamors for government intervention, and the foreign press criticizes British laxity in controlling the sale of poisons. In 1857, a bill to restrict and regulate the sale of poisons is brought before the legislature, but because of vigorous opposition by members of the Pharmaceutical Society, the bill is not enacted until 1868 (1:172).
1859	MILL'S ON LIBERTY	John Stuart Mill writes On Liberty, which is affected by the discussion of opium in India and China and the contemporary alcohol temperance movement. Mills refers to prohibition of the importation of opium into China as an example of undue infringement on the individual liberty of the buyer. On the other hand, while he rejects complete prohibition of drugs, and vigorously attacks the temperance movement, it is not an infringement of liberty to have sales of poisons registered and have their dangerous character labeled. The essay forms one of the basis for the libertarian position that government should not use powers of legal coercion to prevent a person from harming himself or using drugs which may harm him.
	MEDICAL OPINION	The medical profession disagrees on the extent of damage caused by opium. Most deplore its use; however, they believe it is up to the individual addict to cure himself and they are against government intervention (3:7-8).

1860	PRICES DECLINE; IMPORTS RISE	Commercial opium becomes more freely and cheaply available as gradual moves toward free trade lower import duties. Opium now cheaper than alcoholic beverage (12). Britain imports 40 tons of opium, compared to 10 tons in 1830 (4:177).
1860	CHINA TRADE	Treaty of Tientsin legalizes opium in China and opens that country to Christian missionaries. Most missionaries come from Protestant denominations supporting alcohol prohibition; their opposition to opium smoking is total, condemning more severely than drinking (2:307). They are supported in Britain by leaders of the antislavery and temperance movements.
1868	FIRST LAW RESTRICTING SALE OF OPIATES	Pharmacy Act of 1868 is passed by Parliament, dictating that opiates can only be sold by a registered chemist or druggist, or by a legally qualified apothecary. However, there is no restriction on the amount sold, and patent medicines are specifically excluded from the regulations.
1874-75	ANTI-OPIUM AGITATION	Various religious groups and moral (temperance, antislavery) reformers, disturbed over the British exploitation of the Chinese, begin a crusade against the opium trade. The Anglo-Oriental Society for the Suppression of the Opium Trade (SSOT) is organized and heavily financed by the Quakers. SSOT seeks and gains support from all segments of British Christianity (2:2). The anti-opiumists argue that: (1) Britain forced opium on China; (2) revenue is the only reason for continuing the trade; (3) opium can't be consumed in moderation; (4) opium physically and morally destroys the user; and (5) opium is evil (2:307).
	HEROIN	Heroin is discovered by London chemist C.R. Alder Wright. In 1898, heroin is given its name by Heinrich Dreser, a German pharmacologist. It is said that the drug is a good remedy for cough, bronchitis, and tuberculosis, and is not habit-forming.
1880	USE DECLINES	Although the 1868 Pharmacy Act is at first only laxly enforced, it makes it difficult for grocers to sell opium and use begins to decline (12).
1889-93	ANTI-OPIUM RISES	Anti-opium influence reaches it height between 1889-1893; by 1891, over 40,000 tracts are issued and some 3,300 petitions with 192,000 signatures are obtained, and in Parliament a resolution almost passes calling the opium monopoly "morally indefensible" and demanding its end.
1893-95	ROYAL COMMISSION ON OPIUM	The British Liberal Party supports the anti-opium crusade, and when it takes over Parliament it appoints a Commission to determine whether the opium trade should be ended or not. The Commission holds hearings in London and India. Most witnesses are pro-opium, and the report vindicate the opium trade (2:313-16; 5:318-20). The findings of the opium commission include: (1) that the harmful effects of the drug were much exaggerated and were no worse than alcohol taken in excess; (2) that the Indian state opium monopoly was the best system for regulating opium; (3) that limiting or prohibiting opium use would be too difficult and would be widely resented; and (4) that it was a product from which "the maximum revenue from the minimum consumption" should be derived." (For other findings, see persp. 23.)

CHRONOLOGY (Cont'd)

1894		In late 1894, when it is clear that the Commission report will be pro-opium, a new Committee of Anti-Opium Societies is organized with Joshua Rowntree as chairman (2:313). The committee devotes all its efforts toward discrediting the Commission's report.
1895		Commission's report is released.
1890s	STRICTER REGULATION OF OPIUM	Through a series of court cases, the Pharmacy Act of 1868 is interpreted to include patent medicines. All these preparations, including infant sedatives, must be labelled "Poison," and can only be sold by qualified registered chemists. As a result, infant deaths due to opiate poisoning decline (1:174-5).
c. 1900	CRITICISM MOUNTS	Pressure especially from the U.S., mounts on Britain to abandon its laissez-faire policy toward use at home and abroad (4:178). In Britain, Joshua Rowntree's The Imperial Drug Trade (1905) attacks the trade with a scholarly, well documented analysis of British drug policy from an anti-opium point of view. British anti-opiumist emphasize that the U.S. Philippines Commission Report calls the use of opium an evil, for which no financial gain could compensate; they vigorously campaign for Liberal candidates who declare that they will support the end of the trade (2:315-7).
1906	END OF TRADE BEGINS	After ten years of repeated opposition to the opium trade, and the election to Parliament of anti-opium supporters, the British government decides to begin ending the opium trade with China.
1908	EVEN STRICTER REGULATION OF OPIUM	The Pharmacy Act of 1908 places opium, and all preparations containing one or more percent of morphine, into Part I of the Schedule of Poisons, i.e., among the more severely restricted drugs. The Act requires they be dispensed only by qualified chemists or apothecaries.
1909-12	INTERNATIONAL AGREEMENTS	The British attend the Shanghai Opium Conference (1909) and the Hague Opium Conference (1911), because of concern over opium smoking in British Far Eastern territories. These, and subsequent international agreements on drug control institutionalize the prohibitionist morality into official policy across the world; they seriously influence Britain's evolving drug policy throughout the 20th century (7:7; 4:178). But British consistently refuse to let the conferences discuss the opium trade that was being bilaterally ended by Britain and China.
1914-18	WORLD WAR I; CONCERN OVER DOMESTIC USE OF DRUGS	The need for special measures to deal with domestic drug abuse first arises in connection with cocaine, which comes into prominence during the war. London prostitutes are observed peddling and obtaining the drug, and a number of cases of cocaine being given to the troops are reported (7:68).
1916	COCAINE USE INCREASES; DEFENSE OF THE REALM ACT	The first controls on the use of narcotic drugs are imposed. The Defense of the Realm Act is put into effect to curb the rising military and domestic use of cocaine. The act restricts the possession of cocaine to authorized persons, such as doctors or persons with prescriptions for the drug, and also requires persons lawfully dealing in cocaine to keep records which would

CHRONOLOGY (Cont'd)

		be available for inspection. Controls are extended to opium because attempts had been made to smuggle to China.
1917	COCAINE USE DECLINES	The London commissioner of police reports the traffic in cocaine is "almost extinguished." The police urge that the controls be embodied in permanent legislation (7:70).
	OPIUM TRADE ENDS	The Chinese finally buy and burn the last chests of Indian opium and the trade comes to an end.

COMMENTARIES

Opiates, child sedation, and the Pharmacy Act of 1868 -- Lomax, Uses and abuses of opiates in nineteenth-century England, Bull. Hist. Med. (1973), pp. 167-176.

"During the nineteenth century opiates were probably more extensively employed in England than in any other European country. They were taken with, or without, medical authorization for major, minor, or even imaginary ailments, and sometimes exclusively for their euphoric effects. They were as readily available as is aspirin today, and just as cheap....But, whereas the national intake of alcohol reached massive proportions in the mid-nineteenth century, opium eating remained a circumscribed habit. Since the legislature, in spite of the efforts of various select committees, could not find an acceptable formula for reducing the major social problem of drunkenness, it was hardly likely to concern itself with the minor issue of opium eating. Nor could it, in all conscience, do so energetically while simultaneously encouraging the opium trade between India and China, for fiscal reasons....

"However, for the youngest age group, that from zero to five years, opium and not alcohol was the more dangerous drug. It was liberally employed as an infant sedative, especially in the manufacturing districts where mothers went out to work and left their babies in the charge on unskilled day nurses...

"So opium was tossed in and out of the poison list, because no one could agree on what should be done with such a popular, versatile, and potent drug. Finally, it was decided that too many people would be inconvenienced by severe restrictions on its sale. Even the government was not disinterested, since it supported the lucrative opium trade between India and China, without regard to the health of the people of either country. So also in England the interests of small children were sacrificed to those of adults, and in 1868, no serious attempt was made to discourage the sale of infant sedatives....Soon all this was to change, but in 1868, although the government had a good knowledge of the extent to which infants were drugged and killed by opiates, it declined to act decisively on their behalf."

Fenland opium use: its causes and its significance -- Berridge, Fenland opium eating in the nineteenth century, Brit. J. Add. (1977), pp. 275-284.

"Current pre-occupation with the spread of drug dependence to a wider, and younger, section of the population makes it difficult to realise that, only a century ago, significant sections of informed opinion accepted quite calmly the existence of an area of England where large numbers of people of all ages and classes were to some degree dependent on opium. These were the people of the Fens, the low lying, marshy areas of Lincolnshire, Cambridgeshire, Huntingdonshire, and Norfolk. In the Fenland towns and villages, opium took the place of drink; its sale in large quantities was commonplace...

"It may be true that the sale of opium pills and laudanum in large quantities was a development of the early decades of the century. But conditions in the Fenland make it probable that some form of narcotic consumption had been common before that date. The manner in which rather vague medical terms were being used is often obscure but there was a widespread belief that the inhabitants of this part of the country were particularly prone to the ague, 'painful rheumatisms,' and neuralgia. It was to these conditions that the 19th century observers attributed the use of the drug...

COMMENTARIES (Cont'd)

"But in the 19th century opium taking in the Fens certainly became more common. Drainage schemes were under way and more efficient pumping machinery gradually came into use, yet this was still an area of England where it was believed that almost everyone suffered from rheumatic pains, even if 'ague' was a thing of the past. Commercial opium became more freely and cheaply available than it had been; gradual moves towards free trade had seen reductions in the duty on imported opium until in 1860 it entered without any form of financial restriction. Behind the habit may also have lain the fundamental shifts in the structure of agrarian society; enclosure here as elswhere degraded the status of the agriculural laborer. The drainage of areas previously under water and their cultivation led to the use of itinerant 'public gangs' composed of both women and children...

"And as opium taking developed in the Fens, so, too, did public government awareness of its existence; the impression that it was more widespread in the 19th century may, in fact, be only a reflection of greater documentation of the practice. A gradual awareness of the concept of addiction had been emerging since the 1790s, reinforced by the literary reminiscences of Coleridge and DeQuincey and by the Mar law case of the 1830s: government and middle-class fear of intemperance among, in particular, the urban working-class, was already paralleled by a lesser fear that opium taking might spread to the labouring poor. The Benthamite social reforming impulse was leading to a period of inquiries and investigations which specifically concentrated on public health...

"Fenland opium eating was not simply an interesting abberation. The existence of a population which, with exceptions, appeared to tolerate and successfully control the use of opium by informal social mechanisms, had wider implications within 19th century society. It was a powerful argument for those who held that controlled and regular opium use was not harmful, and in particular for the opponents of attempts to restrict opium cultivation in India and the opium trade with China....The opium debate, although centered on Indian and Chinese aspects, constantly referred to this English experience; Dr. Elliot...summed up the contentions of those who saw little harm in opiate use: 'It is ridiculous to compare opium with alcohol, which, when taken in anything like excess, ruins the health and fills our jails and workhouses. We should be inclined rather to class opium with tobacco in its ill-effect (in excess) as regard the body...' He concluded: ...it proved beyond all doubt; (1) That the habit is extremely prevalent; (2) That the quantity consumed is very great; (3) That, after all, it does very little harm.'

"Continued and controlled opiate use in this area over a period of many years without apparent deterioration of the population re-inforced beliefs, widely held in both medical circles and among the public at large, about the safety and even in some circumtances the necessity, of opium taking. The fear which coloured reactions to opiate use among the manufacturing population never affected the interpretation of Fenland opium eating. Outside observers saw it as useful and reasonable, given the particular problems of the area."

De Quincey's Confessions -- Hayter, Opium and the Romantic Imagination (1968), pp. 34-35.

"It is against [the] backgound of general custom and opinion about opium that one must see the addiction of Crabbe and Coleridge and de Quincey and the other writers....Their habit was not considered an exotic and secret vice, but the excess of a normal indulgence, as drunkenness was. Even the doctors were not sure how dangerous it was, and the general public took it for granted. It was not till The Confessions of an English Opium Eater was published, and at once aroused enormous interest, that opium addiction began to be considered as a separate medical and psychological phenomenon which ought to be studied. Till then, even the medical writers who had devoted books to the study of opium had spent little observation on the different effects of addiction and withdrawal from addiction, on the differing symptoms of the early and the later stages of addiction, on the different types of addict--the man who can stick to a moderate never-increasing dosage and the man who must always be piling his dosage higher and higher, the occasional indulger and the utterly enslaved daily habituate. But now the scientific study of drug addiction was to begin. De Quincey is often blamed, and rightly, for the terrible fascination of his masterpiece in drawing in others to follow his example, but he is not often given credit for the impetus which his book undoubtedly gave to the scientific investigations which have helped and saved other addicts.

COMMENTARIES (Cont'd)

Victorian England's anti-opium crusade -- Johnson, Righteousness before revenue: The forgotten moral crusade against the Indo-Chinese opium trade, J. Drug Issues (1975), pp. 305, 318-319.

"Both English (Edwards, 1971) and American (Josephson, 1973) authors credit the United States with 'initiating international moral enterprise on a large scale.'...Josephson (1973:177) remarks that 'while throughout the 19th Century there was an active temperance movement in Britain and various attempts by the government to control drinking, there was no such campaign against the opiates.' (p. 305)

"Josephson was wrong; there were at least three specifically anti-opium organizations in Victorian England with a longevity of twenty-five years of more. Further, although these organizations were almost forgotten before they disappeared, they had organized anti-opium societies in almost every part of the British empire, and aided those in other countries. Thus, they began an international moral crusade against opium long before the United States government became deeply involved. These anti-opium societies had mobilized the public opinion that politically forced the most powerful government in the Far East, and world, to change its opium policy before 1910. Even if the United States had not initiated the opium conferences, Britain would have ended the Indo-Chinese opium trade because of the force of English public opinion mobilized by the anti-opium crusaders" (p. 305).

"The movement was a classic example of a moral crusade (Becker, 1963). The anti-opiumists were fervent and self-righteous in their holy mission against twin 'evils': (a) the 'vicious habit' of opium smoking which physically and morally destroyed the Chinese consumer and (b) it was profoundly disturbing that a Christian government used diplomatic and military force to insure profit from the vice of Chinese. The crusader's humanitarian values held that the prohibition of opium would be good for the Chinese smoker; a proposition many Chinese agreed with.

"Unlike the anti-opium crusade against addicts in the United States between 1910 and 1930 (King, 1972; Musto, 1973; Reason, 1974), British anti-opiumists were not concerned with forcing their morals on Chinese addicts. Rather, like the anti-slavery movement, the anti-opium crusade was directed against powerful pecuniary interests--the British-controlled Indian government. The central element in the debate was whose morality, the anti-opiumist's or India government's, would dictate British government policy toward opium....

"Finally, although documentation must await future papers, this moral crusade was at least partially responsible for development of widely held beliefs about opium. While the political goals of the movement aimed at eliminating the commercial opium *trade*, the crusaders had to educate and convince the public that opium *use* was bad and evil in the fullest religious sense, that the drug was more than a Chinaman's whiskey. Their arguments to support the 'evilness' of opium smoking are the widely accepted 'facts' about opiates and their derivatives in modern times; i.e., opium cannot be consumed in moderation, addiction causes physical deterioration, mental damage, leads to crime, deviant behavior, and is worse than alcoholism.

"Probably the crucial legacy of this crusade is that opium policy should be based solely upon considerations of moral righteousness which tolerate no variation from an ideal. As a corollary, even the slightest pecuniary interest in opiate distribution is to be highly suspect and strongly denounced. Thus, the British anti-opium crusade has left an important, enduring legacy to the twentieth century--a fact which needs to be restored to its proper prominence" (pp. 318-319).

The British medical profession and the opium trade -- Miskel, Religion and medicine: The Chinese opium problem, Hist. Med. & Allied Science (1973), pp. 3, 8.

"One often neglected aspect of the mid-nineteenth-century friction between Great Britain and China over the opium trade is the effort of the British medical community and British medical missionaries in China to formulate cures for opium addiction. Unfortunately, the cures they devised and applied reflected cultural values current in Victorian society, not medical fact" (p. 3).

"In effect the British medical profession [abandoned] China to the laws of supply and demand and the Chinese opium smokers to the uncomforting principle of self-help. In part because of Victorian aversion to big government and in part because of the nature of their

COMMENTARIES (Cont'd)

cures for addiction, the profession refused to give significant support to the Society for the Suppression of the Opium Trade, which saw the suppression of Indian opium cultivation as the best way to put an end to the opium habit. For the individual addict, self-help in medical terms meant reliance on the individual's willpower. Until the demand for opium was reduced through a lengthy process of individual cures and educational programs to make the drug appear less attractive to potential users, China would continue to be plagued by the opium problem. There was really only one group of people in China capable of performing these tasks, the missionaries, especially the medical missionaries."

The Royal Opium Commission -- Owen, British Opium Policy in China and India (1934), pp. 318-24.

"The achievements of the inquiry were wholly quantitative. The report was an impressive document, but the changes which it produced in British opium policy were so trivial as to be unworthy of record. Yet by rubber-stamping the system as it stood, the commission provided a parliamentary rationale for the government of India and its revenue. In summary, the conclusions reached were as follows: No considerable demand existed for prohibiting the growth of the poppy in British India. To extend such prohibition to the native states would be an unjustified interference with the rights of chiefs and people....

"The majority report was signed by Arthur Pease, whose complaisance remained an unsolved mystery to his anti-opium friends. But Henry Wilson, the belligerent non-conformist of the commission, registered a minute of vigorous dissent, in which he charged that the report was more 'an elaborate defense of the East India Company and of the present Government of India than...a judicial pronouncement on the immediate questions submitted to us.' During the course of the investigation, Wilson had complained of the conduct of the Indian government. And again in his minute of dissent he returned to the attack, alleging both that the government had taken an undue part in arranging the evidence and that his colleagues, in their report, misrepresented the testimony that had been laid before them.

"The historian's interest in the Royal Commission lies less in its pallid report than in its procedure. Rarely has an investigating body worked under more ambiguous conditions, and rarely has one been less careful to preserve itself from the suspicion of bias. It is unnecessary to accept all of the detailed criticisms which, even before the inquiry was completed, arose from the anti-opium camp. What remains is the fact that the hearings of the commission radiated the tumult of battle rather than the calm of the laboratory. The proceedings developed into a tournament between two points of view, with both sides determined to state their case in as extreme a form as possible. The government of India was apparently convinced that the hosts of evangelical righteousness were descending upon the opium revenue. And the anti-opiumists were equally persuaded that the government was using all of its resources to resist a thorough investigation.

"...Some of the charges of the opposition were doubtless overdrawn. If the Indian government presented its side of the case with all the effectiveness it could muster, nothing could surpass the zeal with which Wilson and Alexander sought to ferret out evidence against the drug. Yet the fact remains that the commission, in a large measure, allowed itself to be managed by the Indian authorities, and that the auspices under which its inquiry was conducted prejudiced the acceptance of its conclusions."

Changing attitudes -- Sonnedecker, Emergence of the concept of opiate addiction, J. Mondial Pharmacie (1962), pp. 287-290.

"During the nineteenth century several lines of development revealed, though they did not explain, the difference between addiction and habit but they intensified awareness of addiction as a distinctive medical and social problem. In the preceding centuries, since the Renaissance, attentive members of the health professions in fragmented and isolated passages recognized development of tolerance, of physical dependence, of the abstinence syndrome, of the possibility of substituting one drug habit for another, even a hint that this compulsive habit might operate selectively on certain 'constitutions.'

"An integration of the rather casual observations into a unified concept was lacking. There was thus no concept of addiction as a disease or medical problem, or for that matter as a social problem. In European and American thought, opium's danger lay in the toxic power of an overdose or in its untoward effect on the course of certain diseases, not in any risk

COMMENTARIES (Cont'd)

entailed by rhythmically repeated smaller doses. Nor was there moral opprobrium. The oral use of opium left no social stigma, as later use of the hypodermic needle often did.

"Eighteenth-century thought about the compulsive use of opiates smacked of descriptions of cabinet curiosities, and, in form, remained ill-defined if not confused. The lack of even an agreed-upon term suggests that the idea remained amorphous, and the attention to it casual and unfocussed.

"Developments of the nineteenth century brought to the problem a sharper focus and larger dimensions, leading to better understanding. Two pharmaceutical advances, which later were double-edged swords had a dramatic impact on both the beneficent and baneful use of opiates. First, alkaloidal extracts of opium became available through the work of French and German pharmacists, thus making narcotics more precise and predictable in effect, more powerful in action, and more convenient to administer...The availability of soluble salts of opium alkaloids was coupled with hypodermic injection, after Alexander Wood, an Edinburgh physican devised the technique in 1853 and introduced it therapeutically two years later. This intensified the addiction problem in a profound and unforeseen way. Thereby attention was sharply focussed for the first time on what addiction is and what could be done about it.

"Even before the advent of injectable morphine, Western complacency that there were either geographical or class boundaries to the opium habit had begun to disappear....

"This circumstance undoubtedly was aggravated by semi-fictional accounts of the experiences of addicts, a genre of literature of which Thomas de Quincy's Confessions of an Opium Eater in 1821 became the most famous, but of which we have not yet seen the end. The publication of ecstatic and lurid details must have enhanced fascination with the powers of opiates among the addiction-prone segment of the population. Some believe that the literary accounts of addiction can easily be over-rated as causal in the problem then growing. At least it can be said that de Quincy and his literary heirs stimulated an awareness and apprehension about the problem that clinical warning scarcely could equal.

"Other influences that help account for marked change in the magnitude and awareness of the addiction problem in Western countries were: the vigour and profit of the international opium trade; the unreserved medical use of opiates over a wide therapeutic range (for analgesia alone); self-medication with opium preparations that were being powerfully fostered by mass promotion of quack medicines; and the lack of effective legal controls until the present century. Moreover, heavy addictions were created, on a scale that could not be ignored, as a by-product of the unbridled use of morphine in military medicine during and after the American Civil War (1861-65), the Prussian-Austrian War (1866) and the Franco-German War (1870). During the rest of the century, the influences we have mentioned appear to have been augmented by efficient, large-scale production and marketing of opium derivates in industrialized Western nations. Highly competitive, with total production of opium derivates far in excess of the world's conceivable medical needs, this production feat of the new industrialism complicated an already complex problem until international and national social controls gained force, mainly after World War I."

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25

Opiates

Britain

1920-1971

BACKGROUND

Much debate has surrounded the issues of the differences between drug use and policy in Great Britain and in the United States during the twentieth century, particularly the role of the so-called British "system" of medically oriented treatment which has allowed addicts to obtain and use drugs legally. This noncriminal approach has been credited with limiting heroin use, preventing the development of a black market, reducing drug-related crime, and enabling addicts to live useful lives free of police intervention. Following World War I, London police urged that the controls enacted in the Defense of the Realm Act be made part of permanent legislation; this was accomplished in the Dangerous Drugs Act of 1920, which gave effect to the requirements of the Hague Convention. This act restricted opiate distribution to within medical channels, but did not interfere with the legitimate medical use of opiates. Following this act, and until the 1960s, the incidence of narcotic addiction remained low and no further restrictions were deemed necessary. Contrary to the situation in the United States, addiction was seen as essentially a medical problem, a viewpoint affirmed by the Rolleston Committee in 1926, which recommended that physicians be allowed to prescribe heroin and morphine to their patients, and rejected institutionalized treatment. The Rolleston Committee report became the foundation of the British drug policy and Britain continued to have only a marginal drug problem until the 1960s, when heroin use among young males began to increase markedly. Britain responded with the Dangerous Drugs Act of 1967, which imposed stricter controls on the manufacture, sale, and possession of various drugs and also began a program of addict notification and treatment through clinics. The causes of the increase in heroin use are still controversial as is the very nature and effectiveness of the British system both before the 1967 act and afterwards, and its applicability to America's heroin problems.

CHRONOLOGY

1920	DANGEROUS DRUG ACT	The Dangerous Drugs Act (somewhat similar to the 1906 U.S. Pure Food and Drug Act) is passed by Parliament, giving effect to the requirements of the Hague Convention of 1912. Until 1964, British drug legislation follows essentially this procedure of honoring obligations imposed by the various international conventions. The act dictates that opiate distribution must be within medical channels. The only limitation imposed by the laws on a doctor's right to possess and supply controlled drugs is that he be acting in the exercise of his profession, i.e., that the drug be necessary in the course of providing medical care (1:70, 77).
1920-45	USE DECREASES; USER CHARACTERISTICS	Use of opium and cocaine decreases. In 1921, only 184 persons are prosecuted for opium offenses and in 1929, only 39 (4:178; 1:72). Between the two World Wars, there is very little press or Parliamentary interest in drugs; very few cases of addiction are known until the 1960s (1:72-73). Before the 1950s the number known to be abusing narcotics is relatively static, varying between 400 and 600, generally middle-aged, female, and drawn from the medical and paramedical professions. Their addiction is mostly of a therapeutic origin and usually to morphine (7:49).
1924	ROLLESTON COMMITTEE	In order to determine whether the requirements of the Dangerous Drugs Act are being followed, the Minister of Health appoints a Departmental Committee on Morphine and Heroin Addiction,

CHRONOLOGY (Cont'd)

		known as the Rolleston Committee. It is apparent that doctors are prescribing narcotics for nonmedical as well as medical purposes; however, the committee states it sees no reason to regard nontherapeutic addiction as a serious threat. The committee recommends that two groups be legally prescribed narcotics: (1) those who are undergoing treatment for cure by the withdrawal method; and (2) those who, after every effort has been made for the cure of the addiction, cannot be completely withdrawn. The committee also recommends that tribunals be set up to deal with doctors who contravene the guidelines proposed by the committee (1:76-78).
1926	ROLLESTON ACT	The Rolleston Act is passed, giving doctors the right to prescribe narcotics on their own judgment. This law is the primary basis of narcotic drug legislation until 1967. The tribunals are not included in the law (the reasons for this are not clear, but it seems there was a lack of suitable cases for reference) (1:78).
1934	STATISTICS ON NARCOTIC ADDICTION INSTITUTED	The British Home Office establishes a Drugs Branch, which is responsible for supervising the extent of addiction in the United Kingdom, and under treaty agreement, for reporting addiction statistics annually to the League of Nations and later to the United Nations.
1935-53	USE DECREASES	The number of reported addicts decreases from 700 to 290. Addicts still are primarily in the middle-age category, addicted to morphine, and their addiction is of therapeutic origin (1:79; 5:67; 8:25).
1951	NEW TYPE OF ADDICT EMERGES	First signs of an increasing use of heroin appear, due to the theft from a hospital in Kent of a large quantity of morphine, heroin, and cocaine. When the thief is apprehended, his customers appear as patients of a number of London doctors. The addicts are young, nonmedical users. The number of addicts is still small, however; only 301 addicts are reported in 1951 (1:79; 9:119).
1958-60	BRAIN COMMITTEE ESTABLISHED	The First Interdepartmental Committee on Drug Addiction (the Brain Committee) is established to review the recommendations of the Rolleston Committee--not because of increasing heroin addiction, but because a large range of synthetic analgesics have been developed and the new Single Convention on Narcotic Drugs is about to commence. The committee reaffirms the major findings of the Rolleston Committee and concludes the incidence of addiction is very small (1:80).
1959	ADDICTS IMMIGRATE	A group of Canadian heroin addicts arrives to test Britain's reported liberality, but they have minimal influence on the prevalence of drug use in Britain (1:81; 3).
1962-68	HEROIN ADDICTION INCREASES; USER CHARACTERISTICS	From 1962, increasing narcotic addiction among the new user population becomes more apparent. The number of known addicts rises from 301 in 1951 to 532 in 1962. Although less than 200 of these are heroin addicts, the nonmedical use of heroin by young males is the main cause for continued increases throughout the decade. In 1965, the number of known addicts is 927; in 1967, 1,729, of which approximately 1,300 are heroin addicts. By 1968, 30 percent of these addicts are males under the age

CHRONOLOGY (Cont'd)

		of 20. Still, the socioeconomic background of these addicts does not diverge significantly from the general population norm (4:180-183; 7:55; 8:141; 10:75).
1965	BRAIN COMMITTEE	Because of the increase in narcotics use, the Brain Committee is instructed to undertake another inquiry; it recommends that: (1) the ordinary patient should continue to be prescribed by doctors; (2) a system of notification of addicts should be established; (3) special treatment centers should be set up; and (4) the supply of heroin and cocaine should be confined to doctors at the treatment centers (1:81).
1967	DANGEROUS DRUG ACT; LICENSING BEGINS	The Dangerous Drugs Act is enacted, following the recommendations of the Brain Committee. The act restricts the prescription of heroin and cocaine for addicts to specially licensed doctors on the staff of designated treatment centers.
1968	TREATMENT CENTERS SET UP	The Dangerous Drugs Act goes into effect; 25 hospitals are instructed to set up clinics. Sixteen are established in London. Prescriptions of heroin and cocaine are reduced by the majority of treatment center doctors; methadone is often substituted.
	EFFECTS; POLYDRUG USE INCREASES	Immediately the illicit price of heroin increases. Illicit trade in "Chinese" heroin, methamphetamine, methaqualone and injectable barbiturates increases. In expectation of the 1968 law restricting their ability to prescribe heroin, two prescribing doctors start prescribing injectable methamphetamine to their patients (1:88; 4:194; 6:99-102).
1968-72	USE DECLINES	As part of the Dangerous Drugs Act, doctors are required to notify the Home Office of persons whom they suspect of addiction. Compulsory notification allows the Home Office to identify many previously unknown addicts. In the first year, the number of known heroin users increases by about 1,000 (from 1,729 in 1967 to 2,782 in 1968). Though at first it looks as though the rate of increase in addicts has itself increased, it is apparent the increase is due to a compulsory notification. After 1968, there is a steady decline in the numbers of notified addicts--2,240, 1,417, 914, 959, and 868 between 1968 and 1972 (10:53-55; 6: 98-99).
1971	TRIBUNALS	Misuse of Drugs Act passed. Tribunals are set up to deal with doctors who contravene the laws. If doctors are found to irresponsibly prescribe drugs or fail to notify addicts, the tribunals have the ultimate sanction to withdraw the doctor's right to prescribe.

COMMENTARIES

The Dangerous Drugs Act (1920) and the Rolleston report -- Schur, Narcotic Addiction in Britain and America (1968), pp. 70-71.

"Under the Dangerous Drugs Act, the government placed stringent restrictions on import and export of narcotic drugs and established regulations strictly controlling manufacture, sale, and possession of such drugs--as well as the uses to which they might legitimately be put. It is quite clear, however, that by this enactment the government did not intend to usurp the medical profession's responsibility in the field of narcotic addiction. This was shown by the appointment in 1924 of a committee of medical experts, headed by Sir Humphrey Rolleston, to advise the Ministry of Health on the implementation of the Act and more generally on the problems raised by drug addiction. The Rolleston Committee's report,

COMMENTARIES (Cont'd)

much of which is reprinted in the current government literature on addiction, has played an important role in shaping British narcotics policy. Therefore it is particularly noteworthy that the Committee maintained: 'With few exceptions addiction to morphine and heroin should be regarded as a manifestation of a morbid state, and not as a mere form of vicious indulgence.' Indeed this statement aptly characterizes the British approach to addiction from 1920 to the present day."

Roots of the heroin epidemic -- Judson, Heroin Addiction in Britain (1974), pp. 38-39.

"The reasons for the English heroin epidemic are still bitterly argued, for they are by no means altogether clear. Blame has been shared out among the doctors who were prescribing to addicts; the rest of the medical profession, who turned their backs on the incipient problem; the addicts themselves, who were a type that doctors had not had to deal with before; the other drugs adolescents were taking, or that their *parents* were taking; television and the press, for publicizing those drugs; and the more fundamental revolution in youth's customs, beliefs, roles in the social order, and powers of influencing each other which was going on (apparently in all industrialized countries) in the 1960s. Any halfway satisfactory accounting of the English epidemic promises help in interpreting the social mechanisms in other drug crazes, like the amphetamine plague that swept Japan in the '50s or the manic use of stimulants that still afflicts some groups of young Swedes; and, obviously, the English heroin epidemic rightly understood should illuminate, if only by contrast, the American heroin problem. More than that, only by disentangling the causes of the English epidemic can one come to see clearly how it was at last brought under control."

Effects of the British "system" -- Josephson, British response to drug abuse, in: Drug Use in America, Appendix V (1973), p. 176.

"Until fairly recently the few heroin addicts in Britain (less than 200 were known to the authorities in 1962) could with impunity obtain the drug by prescription from their pharmacists; they were regarded not as criminals but as sick--and treated as such. Although some American observers of the British drug scene at this time doubted whether there were any profitable lessons in it for the United States (Larimore and Brill, 1960), others were more favorably impressed--attributing the small number of addicts and the absence of a black market to what was perceived as a medically-oriented 'system' of drug treatment and control (Schur, 1962). In fact, there was no system; but then there was not much of a problem to be concerned about.' Such was the conclusion reached by a distinguished advisory body in 1961 which had been asked by the British government to look into the drug problem.

"The report of this group had not been out long when evidence appeared of fairly rapid change in both the magnitude of heroin addiction and the characteristics of addicts (for the first time there were appreciable numbers under the age of 20). The advisory body was recalled, now viewed the problems with some alarm, and recommended major changes in British drug policy; these changes took place in 1968, by which time there were more than 2,000 known heroin addicts. Heroin, previously obtainable by prescription from private medical practitioners, became restricted: henceforth addicts to this drug could get it only from 'treatment centers' (or clinics) set up for the purpose, from a few other physicians licensed to prescribe it, or from the black market. At the same time the police began vigorously to enforce new laws dealing with the possession of and trafficking in various other drugs, and the number of arrests and convictions for drug offenses also mounted rapidly....

"A recent American observer, Edgar May (1972), reporting on changes in British drug policy up to 1970, concluded that heroin addiction was under control and that Britain's new system of dispensing heroin as well as methadone to addicts under clinic supervision might be worth trying at least experimentally in the United States. However, still more recent findings...suggest that heroin abuse may be somewhat less controlled than British authorities and American visitors believed little more than a year ago. As for the effectiveness of the new clinics in treating and curbing drug addiction, they have yet to be evaluated systematically; whether they provide a model for the United States in its attempt to deal with heroin and other addictions still remains to be seen."

COMMENTARIES (Cont'd)

Effects of the British "system" -- Spear, British experience, John Marshall J. Pract. & Proc. (1975), pp. 90-92.

> "How far the British 'experience,' 'approach' or 'attitude' should be dignified with the term 'British system' is largely a matter of semantics....But of far more relevance is the effect which the British approach or system has, or has not, had on the extent and nature of opiate abuse in the United Kingdom. The debate over the British system in North America is characterised by two extremes. Glaser and Ball regard the British system as a 'myth' and contend that the controls which existed until 1968 were successful because there was a negligible level of addiction in the country. Brecher, however, describes the Rolleston recommendations as 'magnificent.' Specific results of the 'system,' according to Brecher, were the reduction of the United Kingdom addict population to 700 by 1935 and subsequently to 301 in 1951. Brecher also calls attention to the effects of the system on law enforcement, whose real task he saw was 'to keep narcotics out of the hands of non-addicts' and who 'unlike their opposite numbers in the United States were not saddled with the hopeless responsibility of trying to keep narcotics out of the hands of the addicts.'
>
> "As the facts presented in this article show, the Brecher version of the British 'experience' is inaccurate in a number of respects, and any conclusions drawn from these inaccuracies must be challenged. In 1926 the Rolleston Committee reported that addiction was 'rare,' and the first serious estimate of the number of addicts in the country, which was made in 1935, put the total at 700. Yet Brecher misquotes the Annual Report to the League of Nations, in which this estimate was given, when he stated that 'by 1935...there were only seven hundred addicts left in the entire country.' The subsequent reduction of addicts to 301 in 1951, was...very largely due to the changes adopted in the method of compiling the figures. The 'modest change' in the British heroin problem did not occur in 1960 with the migration to London of a group of 15 Canadians plus a smaller group of Americans. Rather, the new heroin subculture began to emerge in 1951, some eight years before the first Canadian heroin addict settled in the United Kingdom. Nevertheless, the myth of the 1960 migration persists. Brecher also states that the adoption of American anti-heroin propoganda methods contributed to the development of the British heroin subculture, but there is little support for this theory. In his review of the origins of the heroin outbreak in Crawley, de Alarcon clearly showed the importance of the case to case spread of addiction.
>
> "On the other hand, the view of Glaser and Ball, that the British were able to adopt a medically oriented approach because the extent of addiction was negligible, accords with the views of most British observers, especially those who have been most closely involved with the problem. The claim of Glaser and Ball that there is no evidence to implicate large scale organized or syndicated crime in the narcotic black market in Great Britain, was as true in 1920 as it was in 1970 when their study was undertaken. Since there never has been large scale syndicated crime in the United Kingdom, Brecher's view that one of the positive benefits of the 'British system' has been the elimination of the criminal black market in heroin is properly discredited. Glaser and Ball have been criticised for their statement that the British Medical Journal took issue with Glaser and Ball and pointed out that the British had not in fact abandoned their traditionally medically oriented approach. Nevertheless, it is understandable that the limitations imposed for the first time on the British doctor's 'sacred' freedom to prescribe whatever he felt his patient's condition required, should appear to transatlantic observers as a move towards greater enforcement. In reality the 1968 measures and the machinery subsequently introduced in the Misuse of Drugs Act of 1971 to deal with irresponsible prescribing, merely provided the safeguards to the British approach, which the Rolleston Committee, some forty years earlier, had felt were necessary if their recommendations were to be followed.
>
> "As long as such widely divergent interpretations, as those held by Glaser and Ball on the one hand, and Brecher on the other, can result from the same set of facts, the debate on whether or not the British 'experience' provides any lessons for North America is unlikely to be resolved."

COMMENTARIES (Cont'd)

Effects of the British "system" -- Smart, Effects of legal restraint on the use of drugs, Bull. Narc. (1976), pp. 58-9.

> "The Second Brain Committee found that in the mid-1960s heroin addiction was increasing, especially among young persons, that much of the illicit heroin came from legitimate prescriptions issued by physicians and that about a half dozen physicians were doing most of the over-prescribing. The Brain Committee made several recommendations which increased controls and made treatment more available. The results were:
>
> (i) Notification of addicts to a Central Registry was made compulsory for physicians: it had been voluntary before.
> (ii) A variety of small treatment centres was established i.e. the British Clinics: about 25 are now operating.
> (iii) Physicians were especially licensed to prescribe opiates and cocaine: only those in clinics and hospitals were allowed to prescribe heroin.
> (iv) A committee continually reviewed problems of addiction and its treatment.
> (v) A rehabilitative rather than a maintenance role was established for the clinics. This meant that prescribed heroin doses were reduced for all addicts in treatment and that methadone was more often used with new patients than was heroin.
> (vi) A system of giving prescriptions through individual pharmacies was developed, rather than giving long running scripts to individual patients.
>
> Since all of these changes occurred within a short period of time the exact effect of any one of them cannot be easily assessed. Was the notification system more important than the licensing? Were the clinic prescribing policies of most benefit? Unfortunately, the chances of actually knowing the answers are remote.
>
> "The effectiveness of the whole system has been a matter of debate for some time: one's assessment of 'effectiveness' depends upon the criteria chosen. The most frequently used criteria are:
>
> (i) numbers of new notifications of adults;
> (ii) heroin related crime e.g. possession and trafficking;
> (iii) seizures of illegal drugs.
>
> It is almost impossible to use the notification statistics to assess the system: notification was not compulsory prior to 1968. When it was required 'new notifications' went up as expected--from 664 in 1967 to 1,476 and 1,030 in 1968 and 1969. If these years are seen as abnormal (because of getting known addicts into the records) and 1970 is seen as the first 'normal' year the system is not very effective. New notifications increased from 711 in 1970 to 807 in 1973. Incidentally, many people doubt whether the notifications system accurately reflects new cases in the population....Convictions for opium under the Dangerous Drug Act (1965) [sic] went from 73 in 1968 to 98 in 1972. Convictions involving all opiates and cocaine possession increased from 464 in 1967 to 1,250 in 1972 and 1,868 in 1973. Seizures of heroin also increased remarkably (435 g in 1968 to 13,100 g in 1972 and 3,205 g in 1973).
>
> "In total, the available data do not guarantee that the changes made in 1968 have decreased the total heroin problem. They may have created a decline in numbers of new cases but the available data on notifications are difficult to interpret. A concomitant problem has been the increase in importing and illegal possession of heroin. Of course which of the various new procedures may have been most or least effective cannot be answered. Conclusions on the total effectiveness of the 1968 changes in Britain are impossible to make."

Treatment clinic evaluation -- Bewley et al., Maintenance treatment of narcotic addicts (Not British, not a system, but working now), Int. J. Add. (1972), pp. 601-602.

> "This paper confirms that the establishment of special clinics to prescribe for opiate addicts has had some limited success. There has been a decrease in availability of opiates on the black market and a decrease in the rate at which new cases are seen. Among those attending clinics there has been an increase in the number working and a decrease in the number receiving sentences of imprisonment, despite the fact that some of those attending continue to misuse drugs of all types. Less than 20% attain complete abstinence from all drugs. Although there are difficulties in prescribing opiates for addicts, the desirable results still outweigh the defects...."

COMMENTARIES (Cont'd)

Treatment and clinic evaluation -- Ogborne and Stimson, Follow-up of a representative sample of heroin addicts, Int. J. Add. (1975), p. 1069.

> "The 3.5 year [1970-1973] follow-up status of a representative sample of addicts prescribed heroin at London Treatment Centres was ascertained using Home Office records. Fifty-six percent were still receiving opiates from clinics with 39% still receiving heroin. Six percent were dead, 2% were in prison, while 34% were not known to be using drugs or to be institutionalized.
>
> "Outcome was significantly related to age with the older sample members being more likely to be prescribed opiates and less likely to be classified as 'Off' drugs. This result is in contrast to American reports and is possibly indicative of a perpetuation of dependency encouraged by current treatment methods."

Treatment clinic evaluation -- Johnson, Understanding British addiction statistics, Bull. Narc. (1975), p. 63.

> "The statistical data issued by the Home Office and Department of Health and Social Security are quite detailed and generally valid measures of hard core addiction in Great Britain....[This] information...indicates that a rising problem of heroin addiction between 1962 and 1967 was arrested by the introduction of the treatment clinics in 1968. Further, legally maintained heroin addiction has been reduced by almost one-third since 1968, since many heroin addicts have been transferred to injectable methadone. The decline in heroin prescribing and the relatively steady number of narcotics addicts has apparently occurred in the face of a continuing, and perhaps increasing, demand for heroin and other opiates.
>
> "...In brief, official British drug statistics seem to be generally valid and demonstrate that heroin and perhaps methadone addiction has been well contained by the treatment clinics."

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(21) Smart, Effects of legal restraint on the use of drugs, Bull. Narc. (1976), pp. 55-65.

26

Ether

Northern Ireland (Ulster)

1840-1927

BACKGROUND

Ether, the distillate of alcohol treated with sulfuric acid, was introduced into medicine as a part of Anodyne by Friedrich Hoffman (1660-1742) in the early 18th century, and was marketed as an industrial solvent and for its supposed pharmaceutical virtues. In 1761, a textbook recommended it as "one of the most perfect tonics." Ether was either inhaled or drunk with water or alcohol, a few drops at a time, producing a rapid drunkenness which disappeared within an hour and left no hangover symptoms. The first known ether "addict" (in 1791) was James Graham, a London quack (2:26). In the 19th century, it was popular as an occasional recreational inebrient among the upper classes in Europe and America. In both Britain and America, early users were young, well-off people were soon engaging in "ether frolics." But by 1890's, use among more sophisticated upper classes declined, possibly in preference to new availability of morphine which was pleasanter to take and left no tell-tale smell (1:630). But by then use has descended the social scale. Its use spread among the lower classes and peasant communities of East Prussia, Hungary, Austria, Russia, Norway, France, and Great Britain. However, extensive use appears to have occurred only in the Northern Ireland counties of Londonderry and Tyrone (2:630-1). In response, church and state officials began a campaign to totally eliminate ether use, citing instances of its terrible effects. Connell (1965), however, emphasizes the ether was maligned; few physicians reported untoward consequences. The effort to control ether drinking in Ulster is one of the few examples of substantial data indicating some effectiveness of legal restraints (2:56); the incident also illustrates how the control of one substance can encourage the use of another.

CHRONOLOGY

1840	INTRODUCTION	Ether is first introduced as a preventive and folk remedy particularly against cholera. At the same time Father Matthew, a Catholic priest, leads a highly successful temperance crusade in England, Scotland, and Ireland. Temperance campaigners often turn over reformed drinkers to physicians from whom ether is purchased for its therapeutic and stimulant effects. One story attributes the introduction of ether drinking in Draperstown, Londonderry, to an alcoholic physician who, having taken the pledge, discovers ether drinking is a substitute stimulant and spreads the news (2:28). At first use remains localized, with users themselves attributing their acceptance to ether's medicinal powers (1:640).
1855	ALCOHOL TAXES STIMULATE USE	British government taxes ethyl alcohol and beverages containing it. The Royal Irish Constabulary clamps down on illicit distillation of poteen (Irish whiskey). The drinking of ether, distilled from nontaxed methylated alcohol, increases in Londonderry and Tyrone, replacing alcohol as an intoxicant (1:642).
1870-90	USE SPREADS	Ether drinking becomes well established. Distilled in England and Scotland, ether is imported into Derry, Dublin, and Belfast, and is forwarded to small-town doctors, druggists, grocers and general dealers, and is spread by peddlers (1:635-6).
	TYPES OF USERS	First used mainly by Catholic small farmers and laborers, then by millhands and other operatives, use even spreads to "respectable" people and members of the learned classes. (1:634).

CHRONOLOGY (Cont'd)

1869-89	CHURCH PROHIBITION FAILS	Local priests attempt to suppress ether drinking by banning it, denouncing it from the pulpit, and making it a reserved sin. Suppression is only locally and briefly successful (1:645).
1890	USE SPREADS	It is estimated that 1/8th of the area's population of 400,000 are regular users or "etheromaniacs" (1:645).
	STATE PROHIBITION	General Synod of the Church of Ireland petitions Parliament for restrictive legislation. The Select Committee on British and Foreign Spirits is established to investigate the issue and ether is scheduled under the Poisons Act of 1870, Part II, so that it can be sold only by qualified pharmacists.
	EFFECT	As all ether is imported from England, trade is easily monitored and restricted. Sales decline, although some clandestine trade does appear since ether is free of the more stringent restrictions of Part I of the Poisons Act (1:646-7).
1910	CONCERN GROWS	Juries in Omagh and Cookstown ask for tighter controls (1:647).
1923	SALES RESTRICTIONS INCREASED	Intoxicating Liquor Act increases restrictions on sale of ether: drinking becomes an offense; no sales are permitted to persons under 18 years of age; retail sales have to be registered (1:647).
	SMUGGLING	Restrictions prove inadequate, clandestine trade continues.
1927	FURTHER RESTRICTIONS	Intoxicating Liquor and Licensing Act adds further restrictions: sales permitted only to doctors and dentists; all sales (wholesale and retail) have to be registered (1:678).
1927+	USE DECLINES	Restrictions prove successful: ether sales and use decline. Drinking ether is replaced by alcohol, which has by now become cheaper and more easily available (2:29). The decline in ether use may also have been facilitated by a rise in incomes (1:657).

COMMENTARIES

Reasons for the spread of ether use -- Connell, Ether drinking in Ulster, Q.J. Stud. Alc. (1965), pp. 642-644, 657.

> "Certainly by the closing decades of the 19th century, with the sources of poteen drying up and 'parliament whiskey' too dear to take its place, disappointed spirit drinkers needing an alternative turned, many of them, to ether; they turned, however, not as pioneers, but following the now-established local custom. Why, our problem is, did their predecessors take to ether in the '60s? Some few, no doubt, because they found poteen scarce, or its quality worse; most, I think, because ether served more cheaply than poteen their purpose of getting inebriated, and promised what might be a more rewarding as well as a cheaper intoxication.
>
> "Favorably publicized and widely distributed as it permitted the advance of surgery, ether was the more readily acceptable and available as a substitute for alcohol; its sale, as yet was unhampered by law; it was cheap....Selling, then, for about a penny a tablespoonful, ether offered several bouts of drunkenness for the traditional price of one: with a single penny, the novice drank his fill and--picking his dealer--treated his friend: 2-pennyworth, twice repeated, gave the hardened drinker a blissful fair day.

COMMENTARIES (Cont'd)

"But, price apart, ether appealed to the man, taking spirit for its effect, the man scornful or unaware of the subtleties of flavor, needing his drink "hot all the way down," hotter to his hardened body even than poteen. raw and fired with vitriol. Even he might flinch at ether; but there were novel sensations and pleasures ahead....

"More puzzling than the spread of ether drinking, is that it spread only over the area of an average county. The need for a cheaper intoxicant, like the taste for a novel intoxication, was more widespread. Elsewhere, certainly, illicit distillation had been more prevalent--and earlier and more successfully suppressed; elsewhere, too, given the demand, ether might have been as readily procured.

"It was, then, no peculiarity of Derry and Tyrone that drove men to ether--no sharper deprivation of poteen, no sharpened poverty or need for inebriation. Ether chanced to be available--sent by the Glasgow cholera; brought by the alcoholic doctor; demanded by Mathew's converts; whatever the reason, ether was locally available. To ether, therefore people turned. Elsewhere, under much the same forces, twisted by local chance, men (defying God now as well as the Revenue) set their stills to work; they craved, or drank, the whisky they could ill afford; they flaunted, or resented, their temperance; they reached for the boot polish, or drifted off with the tramps and their blowhard" (pp. 642-644).

"Nauseating to the palate, difficult to ingest and retain, ether is no beguiling intoxicant. That the people of Derry and Tyrone took it so freely seems to be associated first, with their more than ordinary craving for an intoxicant, built up, not least, by long familiarity with cheap, illicit spirit (poteen); second, with the poverty that drove them to the cheapest available intoxicant, however unpalatable; third, with the emergence of ether in this role as it was widely distributed to meet the hospitals' need, and as its price slumped when produced more efficiently from alcohol freed of tax; and fourth, with the ending of the old ready access to poteen, voluntarily if drinkers yielded to the temperance campaigners, willy-nilly as private distilling was reduced by church and state. The oddity, indeed, is not that people in Derry and Tyrone turned to ether, but that their example was unheeded by fellow countrymen elsewhere, as poor and as disturbed by deprivation of poteen. Of this, no more convincing explanation is offered than that, as ether became cheaper and poteen more elusive, west of Lough Neagh, there was already the odd ether drinker, content with his beverage, an example to his neighbors: from such a pioneer, the habit spread, restrained by the novice's repugnance, until, as it reached Fermanagh and Monaghan, Armagh, Antrim, and Donegal, it was more effectively restrained not only by administrative action but by rising incomes lessening the need for intoxication as they gave access to seemlier intoxicants" (p. 657).

Ether use outside Ireland -- Nagle, Anesthetic addiction and drunkenness: A contemporary and historical survey, Int. J. Add. (1968), pp. 29-30.

Ireland, although the foremost, was not the only country in which ether was substituted for alcohol. About the turn of the century in East Prussia, Austria and Hungary, ether was inhaled or mixed with drinks. Again, heavy taxes upon alcohol may have been a factor. France, Russia, Norway, and Michigan were also reputed to have ether drinkers. During this country's [United States] experiment with prohibition, near-beer and other beverages were sometimes spiked with ether. Ether was also substituted for liquor in Germany during World War II. Many ether addicts have never been reported in the medical literature. For example, ether inhalation as a substitute for ingestion of alcohol was felt to be widespread among the upper classes in England in the late nineteenth century. Thus, although the true incidence of this problem is probably low, it is nevertheless somewhat higher than the frequency of reports in the medical literature would seem to indicate.

The appeal of ether -- Connell, Ether drinking in Ulster, Q.J. Stud. Alc. (1965), pp. 633-634.

"To the novice, ether offered no immediate pleasure of palate or stomach. Self-experimenters had difficulty in swallowing it at all: 'The eyes water, the mouth closes on it, and there is an absolute kind of revulsion to the whole thing which seems to shut it out.' The taste was 'highly provocative of vomiting'; so, too, was the contraction of the wall of the stomach as ether irritated the lining. If the ether were retained, its volatilization was accompanied by 'violent eructations,' by 'great dissipation of wind,' and by a

COMMENTARIES (Con't)

a sensation in the stomach variously likened to warmth or burning, to a 'a ball of ice,' or 'the feeling you have when you grasp a piece of lead.'

"In a few minutes, given an appropriate dose, the drinker's pulse quickened, his face flushed, a wave of perhaps hysterical excitement yielded to a calmer mood and "he dreamed himself into his personal paradise." He was in fairyland. Cares vanished in 'blithesome gladness'; his pulse beat with joy, his eye glistened with love. French initiates likened their state to champagne drunkenness: they were in paradise, listening to delicious music as they danced at the ball and walked on the clouds. In Ireland, too, 'you always heard music, and you'd be cocking your ears at it....Others would see men climbing up the walls nice and easy.' The erotic appeal of ether was stressed more by continental than by Irish observers. Elsewhere, men, hoping for 'strange voluptuousness,' were rewarded by visions of 'lascivious situations' and 'beautiful women'; but in Ireland (where ether inebriation was a regional more than a personal problem) the drinkers' dreams were said to be 'light' and 'refined.'

"In folklore, if not in physiology, the agreeable effects of one day's ether might be recaptured the next, simply by drinking a glass of water. But the ether drinker's 'luxurious advantage' was that, half-a-dozen times a day, he might pass through 'the drama of intoxication.' Within the hour--in 20 minutes, some said--he might be sober, helplessly drunk and sober again. Recovering, he was a little depressed, needing a repetition of his pleasurable experience; and denied it by none of the spirit drinker's headache or vomiting."

The significance of the Ulster ether epidemic -- Blum et al., Society and Drugs (1969), p. 36.

"We deem Connell's history to be the classical epidemiological case. It shows how a potent psychoactive substance spreads from small to large groups and from informed and wealthy innovators to poorer and less informed folk. One sees how there are initial claims for dramatic medical virtue--some of which may be substantiated over time--how folk medical application leads to widespread self-dispensing, and how use depends upon publicity and, economically, upon low cost and high availability. Spread of use depends upon a self-diagnosed need--in this case the clear desire among a heavy-drinking population for an immediate substitute after being deprived of their traditional intoxicant. Further, the substitute must bear a resemblance to the original; with ether, its fiery sensation was akin to the home-brew itself and appealed to the same image of the drinker as a 'he-man.' Necessary, of course, is the effect, and ether provided a most satisfactory intoxication. Its limitations, on the other hand, aided in its abandonment--nausea, flatus, the strong smell, and the awkward nose-holding administration. Fundamental to its control were these factors: government ability to enforce controls over distribution; an alliance of moral and state authority in its denunciation; the failure of ether to enlist an overt lobby or covert activists in its behalf; and, in the turn of the wheel, a change in economic conditions, which resulted once again in the production of a better-tasting, more-prestigeful, and traditional brew, whiskey. Thus, the population did not need to suffer abstinence and deprivation and could return to prized old ways."

The control of the epidemic -- Smart, Effects of legal restraint on the use of drugs: A review of empirical studies, Bull. Narc. (1976), p. 56.

"Ether was never made in the Irish Counties in which it was most popular and imports from Britain and Southern Ireland could be easily stopped under the Poisons Act. Apparently, illicit manufacture or distribution was never a serious problem. The legal restraint worked in concert with religious persuasion and the relative value of each is difficult to assess, although the strongest influence would seem to have been the Poisons Act. This is one of the very few instances where scheduling a narcotic as a poison had remarkable effects on its use."

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(5) Blum et al., Society and Drugs (1969), pp. 34-36.
(6) Lewin, Phantastica (1964), pp. 198-205.

27

Cannabis (Ganja)
Jamaica
1845-1974

BACKGROUND

Jamaica has probably the highest density of cannabis users of any country in the Western Hemisphere; an estimated 60 to 70 percent of the lower income section of the rural population--men, women, and children--are users. It also has had one of the longest histories of legislative attempts to eradicate use. Brought by East Indian indentured laborers in the 19th century, cannabis--or, as it is known in India, ganja--soon became used for a variety of purposes by rural and urban working-class populations. There developed a sociocultural complex surrounding its use referred to by Rubin and Comitas (1976) as the "ganja complex," which exhibits a series of definable and repetitive activities, characteristic social groups, and an integrated body of beliefs and values. most research on marihuana in the U.S. has been on short-term, light-dose use among middle class, student populations. In Jamaica, on the other hand, long-term, heavy consumption is widespread among the lowest, least productive strata of society. The heaviest users may consume up to 10 times as much THC, the active principle of marihuana, and possibly 25 times as much. The Jamaican research provides one of our most significant sets of data on chronic cannabis use.

In this perspective, the Chronology traces the effects of Jamaica's strict prohibitive legislation and the forces that have influenced the passage of this legislation. Two factors are particularly of interest. First, the Jamaican ganja legislation was based less on knowledge of cannabis and the ganja complex than on socioeconomic conditions and racial/class prejudices and fears. Second, 60 years of the most stringent legislation have failed to effect either the cultivation or consumption of ganja. Presently, ganja is still of major sociological, political, and economic significance in the island.

In the Commentaries, various aspects of Jamaican ganja use are discussed: (1) the lack of user reports of hallucinogenic experiences; (2) the belief that it acts as a work stimulant--a motivational syndrome instead of an amotivational syndrome; (3) the influence of cultural rules or social controls in moderating use; (4) and the evidence that use may be, at least in part, the result of economics.

CHRONOLOGY

1845	INTRODUCTION	Indentured laborers from India arrive in Jamaica to work the sugar plantations after the abolition of slavery. By 1917, about 33,000 immigrants have come to Jamaica from India, probably bringing with them the multipurpose use of cannabis or ganja (5:1; 1:16, who reject theories of earlier African origins).
1883-4	LUNACY RELATED	First official mention of ganja smoking maintains it causes lunacy (1:21).
1892-3	USE SPREADS	Report of the Protector of Immigrants maintains that East Indian laborers are using ganja.
1893-4	HEMP COMMISSION	Indian Hemp Drugs Commission reports on benign effects of moderate cannabis use.
1913	CONCERN GROWS	Lengthy editorial in the Daily Gleaner refers to the "considerable concern" among Jamaican planters over ganja smoking among natives and alleges ganja has a demoralizing, criminogenic influence on East Indian laborers (1:22, 174-5).

CHRONOLOGY (Cont'd)

1913	PROHIBITION	International Opium Convention ratified; Jamaica adds prohibition against *Cannabis sativa* to the Opium Convention. Possession and use are not yet specified as criminal acts.
1924	PENALTIES INCREASED	Dangerous Drugs Law passed, increasing existing penalties for use of opium or *ganja*.
1930's	SOCIETAL DEVELOPMENTS	Economy enters depression and Rastafarianism rises among island's lower class blacks. Rastafarians blend the political philosophy of Marcus Garvey, a fundamental interpretation of the Bible (including that God is black), and the belief that *ganja* is a holy plant. Concern over drug use increases. (1:24, n.2; 6).
1941	PENALTIES INCREASED	Penalties are increased for possession, sale, and cultivation; mandatory imprisonment is decreed for the first time. In part, this is a response to the passage of the Marihuana Tax Act of 1937 in the United States, economic depression, and the Rastifarian-associated antagonisms in Jamaica (1:24-5, 177).
1948	PENALTIES INCREASED	Following World War II, *ganja* becomes a major topic of police and public concern. Dangerous Drugs Law amended; penalties blanket all forms of possession and sale, distinguishing between these offenses and smoking.
1949-50	CRIME CONCERNS	*Ganja* use is associated with crime by the Commissioner of Police, T. Calver (1:26-7).
1950's	CONCERNS DECLINE	Economic conditions improve; Jamaican crime rates are at the lowest level for the century; atmosphere is optimistic.
1960	CONCERNS INCREASE	Several British soldiers are killed during an insurrection involving a *ganja*-using religious group. Press and public associate disorders with *ganja* use; the minister of home affairs declares that the police are convinced that 50-75 percent of violent crimes are a result of *ganja* smoking (1:26-7).
1961	PENALTIES INCREASED	Jamaica gains independence. Dangerous Drugs Law amended to increase penalties for growing, selling, and dealing.
1962-4	LEGISLATIVE DEBATES	A series of legislative debates are held concerning new *ganja* legislation.
1964	PENALTIES INCREASED	Dangerous Drugs Law amended, increasing mandatory imprisonment for the first possession conviction; for the second conviction, the police are given powers of search on the authority of a sergeant, instead of a magistrate's warrant. It also becomes an offense to allow a premise to be used for cultivation or use of *ganja*, and police are empowered to seize vehicles suspected of carrying *ganja*.
1972	PENALTIES INCREASED	Dangerous Drugs Law amended, repealing mandatory sentencing provisions of earlier legislation and giving the courts discretionary power in sentencing; maximum penalties for possession are kept the same and maximum penalties for cultivating, selling, and dealing are increased.

CHRONOLOGY (Cont'd)

1973-4	TRAFFICKING CONCERNS	Reports appear of large-scale, organized exportation of *ganja* across national boundaries in exchange for money for small arms. Jamaica becomes the trans-shipment port for hard drugs for South and North America. New wave of criminality develops. (1:36)
1974	PROPOSED LEGISLATION	Amendment to Dangerous Drugs Law, introduced in April 1974, calls for massive penalties for trafficking in *ganja* and hard drugs.

COMMENTARIES

Beliefs and values -- Comitas, The social nexus of *ganja* in Jamaica, in Rubin, ed., *Cannabis and Culture* (1975), pp. 128-131.

> "What are the principal beliefs and values which give life to the *ganja* complex in Jamaica? Most importantly, users firmly believe in the efficacy of the substance. Nevertheless, a sharp distinction is made between the effects of tea drinking and those of smoking. The folk explanation is that teas and tonics are absorbed into the blood stream, strengthen the blood, and enable it to ward off disease, whereas *ganja* when smoked goes directly from the lungs to the brains where it may have sometimes unpredictable consequences....
>
> "*Ganja*, primarily in the form of teas and tonics, is widely believed to have medicinal properties, both prophylactic and therapeutic. It keeps the user in good health, prevents constipation, colds, gonorrhea and a host of other ills. It is held that it is particularly good for children, preventing disease in general and marasmus in particular. With *ganja* tea, the youth grow stronger and smarter. For the mass of users, *ganja* is valued as a cure for a wide assortment of complaints from arthritis to stomach ailments.
>
> "There are strong beliefs related to physiological, psychobiological and psychodispositional effects of *ganja*--beliefs related to sleep, appetite, sex, reflection, relaxation, and the like. Descriptions of these effects, however, are typically qualified by mention of necessary, prior conditions. For example, if a user is in the mood to go to bed, *ganja* will make him sleepy. More importantly, however, there is little evidence indicating that *ganja* is systematically consumed by adults specifically for the purpose of inducing these states.
>
> "There is one important exception to this rule--*ganja* is regularly taken to increase work capacity. Almost universally, users maintain that *ganja* enhances their ability to work, that is, to perform manual labor, and they regularly consume *ganja* with this objective. In this regard, *ganja* is believed to take effect in two ways. One is the cumulative benefit that comes with 'building' one's blood and strength with regular dosages of *ganja*. The other is that *ganja* has the immediate effect of producing a burst of energy sufficient for completing laborious tasks....Almost unanimously, informants categorically stated that *ganja*, either in teas or smoked, made them work harder, faster, and longer. For energy-related purposes, *ganja* can be and is taken in the morning, during breaks in the work routine, or immediately before particularly onerous labor.
>
> "Putting objective assessments of these claims aside, the belief that *ganja* acts as a work stimulant, and the observable behavior that this induces, casts considerable doubt on the universality of what has been described in the literature as 'the amotivational syndrome'.... In Jamaica, and we would suspect in other marihuana-using agricultural countries, cannabis, at least on the ideational level, might well be central to a 'motivational syndrome.' *Ganja*, in the rural reaches of Jamaica, is a substance that apparently permits the individual to face, start, and carry through the most difficult and distasteful manual labor. Following from this, it could be argued that in certain types of non-industrial economies based on small-scale agriculture faced with difficult ecological conditions and complex land tenure systems, marihuana use may well have positive social value.
>
> "*Ganja* carries other values of considerable sociological significance. On one level, smoking the substance is considered adventurous by the adolescent boy: by participating in an illegal practice, even though it is widespread among his elders, the young smoker believes he is demonstrating courage, defiance, and, most importantly, manhood. In subtle ways, the smoking of *ganja* is considered by the young almost as a *rite de passage*, an auda-

COMMENTARIES (Cont'd)

cious act signifying transition from adolescence to maturity. On another level, particularly for males from the lowest socioeconomic rung of the society, smoking symbolizes camaraderie, equality, and belonging; it is a sign of friendship and trustworthiness.... Well based on customary behavior, *ganja* smoking has developed into a social activity limited only to age, work, and status peers. Therefore, among the rural poor, to smoke is to conform; not to smoke may mean social marginality--the reverse of the situation found on the higher social levels...

"The upper elements of Jamaican society hold *ganja* responsible for increases in delinquency and criminality. Such views are continually reinforced by a stream of newspaper reports vividly describing assaults, robberies, and murders allegedly perpetrated by individuals under the influence of *ganja*. Little, if any, objective and substantiated evidence exists, however, which can support these charges. On the contrary, our research indicates that compared with non-smokers of similar stations in Jamaican life, smokers are similar in every major dimension--certainly no less hard-working and no less socially capable. The overwhelming majority of even the heaviest smokers are law-abiding citizens, except with regard to cannabis, with no criminal involvement with police or court. Nevertheless, the stereotypes held and promulgated by the upper elements persist and flourish in Jamaica.

"The Jamaican *ganja* laws which date back to 1913 appear, in historical retrospect, to have been based on class and racial factors rather than on objective medical and social evidence (Rubin and Comitas 1972:43-90). In any case, they are so viewed by the *ganja*-using population who see this legislation and its enforcement as arbitrary, directed against the laboring masses, and utilized by those in control for purposes far beyond the intent of the letter of the law. Some users hold the relatively benign opinion that 'government' simply does not understand that *ganja* causes no harm and does not lead to violence. Most, however, cling to conspiratorial views: 'government' is antagonistic to poor people having anything good and will take *ganja* away; or, legalizing *ganja* would adversely affect the 'big men' who make 'plenty profits' from the plant; or, medical doctors are against *ganja* because users do not get sick; or, more generally, *ganja* laws make the vulnerable people of Jamaica more vulnerable.

"Granting the biases and distortions in these convictions, they should not and cannot be summarily dismissed. From one perspective, they reflect more general feelings of societal abuse harbored by many in the laboring population. From another, they underscore the social danger of institutional and institutionalized misunderstanding in a sharply stratified society."

Class roots and effects of legislation-- Rubin and Comitas, Ganja legislation, in *Ganja in Jamaica* (1976), p. 33.

"Throughout its entire history, *ganja* legislation has been deeply rooted in local, anti-lower-class sentiments; and allegedly damaging effects of *ganja*, particularly its supposed relationship to violence, were never seriously disputed. With few exceptions, participants on both sides tended to accept 'the spirit of the legislation,' the need for firm controls. ...Time after time, the widely held concept of *ganja* driving ordinary men (i.e., working men) berserk, either in individual or mass incidents, arose in the *ganja* debates.

"The nature and extent of the acceptance of *ganja* into the life style of the average Jamaican was never seriously examined or debated, and the possibility that severe legislation might conflict sharply with folk values was not viewed as a serious problem. At various points, it was categorically asserted that restrictive legislation could change widespread values and behavior. At other times, it was asserted that *ganja* smoking was the practice of a dangerous minority that could only be controlled by severe legislation.

"Jamaican *ganja* control has failed in its objective to eliminate or reduce the cultivation and use of *ganja*. Over six decades, all types of control mechanisms have been employed with the exception of massive public propaganda or severe penalties for export. Stringent penalties for all other types of *ganja* offenses, considerable extensions of police power, rewards to informants and to successful police prosecutors, large-scale police raids and, since 1963, use of helicopter searches and surveillance have all been used to uphold the Dangerous Drugs Law. Nevertheless, the evidence strongly suggests that *ganja* use and cultivation have increased and, significantly, that these law enforcement methods may well have had damaging side-effects on the administration of justice generally."

COMMENTARIES (Cont'd)

Ganja and hallucinations -- Rubin, the "*ganja* vision" in Jamaica, in Rubin, ed., *Cannabis and Culture* (1975), p. 265.

> "It is clear from the Jamaican data that hullucinations are *not* an invariable consequence of marihuana use. In the Jamaican working class setting, hallucinogenic reactions are neither regularly sought nor generally experienced....
>
> "Contrasts in the 'marihuana habit' of middle-class Jamaicans and the *ganja* complex of working-class Jamaicans reinforce the thesis that psychoactive reactions to cannabis are conditioned by the cultural formulation of both experience and behavior."

Ganja as an alcohol substitute -- Prince, et al., Cannabis or alcohol?, *Bull. Narc.* (1972), pp. 4-5.

> "We have now seen that ganja use is widespread among Jamaican males in the low-income bracket, especially within the age group 15-35 years of whom from 30 to 65% use ganja every day. Do these men use ganja as an alcohol substitute and, if so, do they use it because they prefer it to alcoholic beverages or because it is cheaper than alcohol?
>
> "Let us first examine the question of cost. It is clear that ganja is a cheaper euphoriant. According to our informants, the euphoriant effect of a "stick" or a "round" of ganja (costing 12 to 24 cents, American) is equal to the effect of three to four bottles of beer (at 18 cents a bottle), which is equivalent to three or four "drinks" of white rum (at 12 to 24 cents a drink). We may say then that ganja is very roughly three or four times cheaper than alcohol per 'high'.
>
> "Of course the subjective effects of ganja and alcohol are not the same. Do the Jamaican poor prefer the effects of ganja to the effects of alcohol? To explore this question we asked the hospitalized sample: "If alcohol and ganja were equally available to you, which would you prefer?"...Heavy current *ganja* users almost all said they would prefer ganja, but almost all the light users and heavy past users said they would prefer alcohol. It should also be noted that of the 26 heavy current users, ten were members of the Ras Tafarian cult who, as we have said, use ganja for religious reasons. When we remove this special group we find that only 25% of the remaining ganja users express a clear preference for ganja. Of course there may be other reasons why Jamaicans say they would prefer alcohol apart from the subjective effects. Is it a matter of status? That is, do these low income ganja users see alcohol as being used by higher status members of the community and would they prefer to use alcohol because of its higher status implications? Or is it that they prefer the taste of alcoholic beverages? Or do they say they would prefer alcohol because its use is free of the legal dangers of ganja use? Unfortunately, our questionnaire was not sufficiently explicit in this area so that we are unable to answer these questions. It does seem safe to conclude however that for many poor Jamaican males, ganja does serve as a substitute for alcohol and that it is used mainly because it is cheaper."

Cultural controls and economic factors -- Beaubrun, Cannabis or alcohol: The Jamaican experience, in Rubin, ed., *Cannabis and Culture* (1975), p. 494.

> "What lessons can be learned from the Jamaican experience? If we cannot substitute cannabis for alcohol, we can note that in Jamaica, the reason that cannabis works among the poor is because the cultural rules are so well defined; the screening mechanisms, the validation of non-smoking, the other things. We must learn folkways which would enable us to better cope with our drug of choice--alcohol...
>
> "But let us not forget Prince's original finding that the reason cannabis was being used instead of alcohol in Jamaica was probably an economic one. It is really quite simple, *ganja* is cheaper than alcohol and freely available to the poor....Perhaps the pricing of whatever is the drug of election or putting it out of reach is one of the ways of dealing with the situation, not forbidding it, because forbidding it only produces the forbidden fruit complex, which makes it all the more desirable."

Ganja as an alcohol substitute -- Rubin and Comitas, *Ganja in Jamaica*, pp. 147-149.

> "As compared to rum, *ganja* use in the working class is of relatively recent origin. Rum, a by-product of sugar processing, has been the leading alcoholic beverage of the working

COMMENTARIES (Cont'd)

class in Jamaica for centuries. Readily available, comparatively cheap and potent, it facilitates male sociability in neighborhood rum shops. In areas with limited means for leisure pursuits, rum shops have traditionally been the principal setting for male congregation and conviviality. After work on week-days and especially on weekends, men gather in these shops to talk, play dominoes and drink.... The relatively recent but pervasive spread of *ganja* smoking among working-class males invites comparison with patterns of alcohol consumption, particularly in terms of subcultural preferences and sociopsychological functions...

"Life history data from the sample population of the study fail to support the economic thesis that cannabis is the poor man's substitute for alcohol. Subjects perceive the issue from a somewhat different perspective, viewing *ganja* as a "benevolent alternative" to alcohol, not in terms of costs, but in their perception of differential effects. In this respect, *ganja* appears to be a discretionary option...

"Although there is no clear-cut demarcation between *ganja* and alcohol consumption in Jamaica and *ganja* users generally are not teetotalers, there are differences in quantity and frequency of *ganja* and alcohol consumption, and particularly in the values attached to their use. Universally, the smoker sub-sample preferred *ganja* to alcohol, citing differences in their reactions rather than economic factors as the principal rational. Aggressiveness and loss of control are seen as the disvalued effects of rum drinking, as opposed to the perceived beneficial reactions to smoking *ganja*."

"Over the past one hundred years, the *ganja* complex has developed and proliferated in Jamaican society and is extraordinarily well integrated into working-class life styles. *Ganja* serves multiple purposes that are essentially pragmatic, rather than psychedelic: working-class users smoke *ganja* to support rational task-oriented behavior, to keep "conscious," fortify health, maintain peer group relations and enhance religious and philosophical contemplation. They express social rather than hedonistic motivations for smoking.

"*Ganja* as an energizer is the primary motivation given for continued use. The concern of many in the United States that marihuana creates an "amotivational syndrome" and a "reduction of the work drive" is not borne out by the life histories of Jamaican working-class subjects or by objective measurements, which indicate that acute effects may alter the rate and organization of movement and the expenditure of energy during work, but that heavy use of ganja does not diminish work drive or the work ethic.

"There is no evidence of any causal relationship between cannabis use and mental deterioration, insanity, violence or poverty; or that widespread cannabis use in Jamaica produces an apathetic, indolent class of people. In fact, the *ganja* complex provides an adaptive mechanism by which many Jamaicans cope with limited life chances in a harsh environment."

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28

Stimulants

Japan

1945-1975

BACKGROUND

The first amphetamine was synthesized in 1887, but it was not until after 1927 that effectiveness of amphetamines in raising blood pressure, enlarging nasal and bronchial passages, and stimulating the central nervous system became apparent. During World War II they were employed to increase efficiency in war industries and the military. The real spread of use followed, when amphetamines became increasingly available and were marketed as safe euphoriants, mental energizers, and cure-alls for such problems as depression, fatigue, and weight reduction. Full recognition of their dependency liability and the adverse consequences of use emerged gradually thereafter.

For 25 years, epidemic outbreaks of amphetamine abuse have been a recurrent problem, particularly within technologically developed countries such as Japan, Sweden, the United States, and Great Britain. The first of these epidemics occurred in Japan and constitutes what has been called "one of the most important chapters in the history of drug dependence" (1:179, see commentary). With the exception of tobacco in the 17th century, Japan had never had any substantial drug problem until the early 1950s when a parenteral methamphetamine epidemic occurred when large amounts of the drug were dumped on the market and widely advertised. The situation was aggravated by the hardship, dislocation and rapid changes postwar Japan was undergoing. Oral use of methamphetamine (known as awakening drugs or wake-amines) spread throughout the country. The parenteral abuse was first limited to cultural elites, students, and nightworkers, but soon also become widespread, particularly among young urban delinquents. Successful control of the epidemic has been attributed to the severe legal restraints imposed on production and sale, which restricted their use to medical treatment and research. Vigorous education and treatment programs were also undertaken. Following the implementation of these measures, the epidemic did subside, but it is difficult to interpret the exact influence of each of these factors. It has been suggested that epidemic use may be self-limiting; as the drug subculture becomes increasingly criminalized and violent, many users burn out, and many disenchanted recruits stop before becoming heavily involved (4:234). It is further apparent that the problem of drug abuse in Japan was not eliminated. Almost immediately following the imposition of amphetamine controls there occurred a rapid rise in the use of heroin and other drugs, especially among former amphetamine users. This suggests an interlocking epidemiological relationship among various drugs of abuse. Stimulant abuse also revived in the 1970s. But despite the rise of other drugs of abuse, the use of marihuana and hallucinogens was still not prominent in Japan, possibly because, as Koto (1969) comments below, Japanese drug users were seeking a flight from reality rather than the promotion of creativity and enlightenment.

CHRONOLOGY

1940	INTRODUCTION	Methamphetamine enters the Japanese market for use in psychiatric treatment, treatment of narcolepsy, and weight reduction; it may be bought in injectible form over the counter, without prescription. In wartime, it is called "the drug to inspire fighting" -- Senryoka Zokyo Zai.
1945	CONCERN BEGINS; SOCIETAL DEVELOPMENTS	Widespread oral use is first noted as vast quantities of methamphetamines are released on the market. Advertisements emphasize the drugs would help users to "shake off sleeplessness and become energetic." Use throughout the country is stimulated by ready availability of the military stock following the war, the spiritual collapse of the people, the need to work desperately to make a bare living, and the indifference of the community and family towards the education of young people in the postwar period. The population is increasing while only 15% of the land is usable for agriculture; social, economic, educational, and moral changes occur throughout society and the traditional authority structure of the country begins to loosen (1:186).

CHRONOLOGY (Cont'd)

	USERS	The first cases of parenteral abuse (basically intravenous) appear predominantly among bohemians, novelists, artists, and entertainers. Use is also reported by students, for study and sport, and by nightworkers.
1948	RESTRICTION	Methamphetamine is listed as a dangerous drug.
1949	CONTROL LAW INEFFECTIVE	Law is passed putting control of amphetamines under the Pharmaceutical Affairs Law; use is restricted to cases under a doctor's prescription; companies are ordered to suspend manufacturing the drug; and the government increases the ratio of intravenous capsules to oral medication believing that I.V. use will occur only in hospitals. The results are disappointing; all measures prove inadequate; an illicit market for homemade drugs develops and I.V. use increases (2:592; 3:19-20; 4:305).
c. 1950	MARGINAL USE SPREADS	Use spreads among economically marginal and delinquent youths, particularly Koreans. Those arrested usually are between the ages of 16 and 20, and have a history of disturbed life patterns (1:182). In one sample of 11,000 arrestees, 71.5% were male and 66.6% were between the ages of 20 and 27 (1:181-2; 2:592-5; 3:20-1).
1951	CONTROLS INCREASED	Awakening Drug Control Law (ADCL) is enacted: Importation of wake-amines into Japan is prohibited; possession, manufacture, sale, and purchase are severely restricted. Prepared in accordance with the Narcotics Control Law, the amphetamine law aims: (1) to restrict use of street drugs to medical and scientific purposes only; (2) to list persons and enterprises who would be entitled to possess and manufacture amphetamines; (3) to prohibit possession of amphetamines; and (4) to issue transfer and receipt forms for amphetamines over to Metropolitan, Hokkaido and Prefectural governors on delivery in order to prevent diversion (5:20; 3:20).
1951+	GENERAL USE SPREADS	Use increases rapidly throughout all Japan, affecting all classes and areas but taking its heaviest toll among urban marginal populations. Light punishments for violations do not lessen incidence or illicit manufacturing (3:20; 2:592).
1953	EDUCATIONAL CAMPAIGN	Massive campaign is launched to educate the public.
1954	EPIDEMIC PEAKS: HEROIN APPEARS	It is estimated there are over 2 million users out of a population of 88.5 million; 55,664 are arrested under the ADCL. Most users are in their teens and twenties, with data indicating a close relationship between juvenile delinquency and wake-amine abuse (1:181; 2:592; 5:15). Of methamphetamine users 8-30% are also using heroin (1:188).
	CONTROL STRENGTHENED	Awakening Drug Law is revised, tightening penal provisions to control raw materials of the drugs. The Mental Health Law is amended, to include treatment of addicts, but the illicit manufacture of drugs and the black market still continue (3:20).
1955	CONTROL AGAIN EXTENDED	Awakening Drug Law is again amended to control intermediates and precursors for the manufacture of street drugs. General Headquarters for the Promotion of Policy against Amphetamines

CHRONOLOGY (Cont'd)

		is established. The Headquarters is to work through cooperation with other bodies; antidrug centers are established; attention is directed toward educating social workers and teachers to be aware of youth.
	USE DECLINES	After this second revision, the number of abusers declines and arrests decrease to 32,143 (2:596; 3:20).
1956	FURTHER DECLINE	Only 5,233 arrests (3:20).
1957-1963	HEROIN USE RISES	Relatively few cases of amphetamine abuse are reported, and only 803 arrests (3:20); but as amphetamine abuse declines, there is a sharp rise in heroin addiction among the lower classes and young delinquents. A series of other drug-dependency problems develop, all new to Japan (1:181). Fifty percent of heroin abusers are former methamphetamine abusers (2:600).
1958	SPA ABUSE	Abuse of SPA (Diphenyl dimethylaminoethane), a stimulant and analgesic, develops.
1960	HYPNOTICS ABUSE	Rise in hypnotics abuse, particularly the use of methaqualone (Hyminal), by young delinquents and students (2:620).
1963	NARCOTICS CONTROL	Narcotic Control Law amended: penalties are strengthened, and a new system of compulsory treatment is established (6).
1964-69	HEROIN USE DECLINES	Drug abuse sharply declines, although the severe control of heroin causes a new problem with medicinal narcotic drugs (6:107). By 1964, the production of sedatives, hypnotics, and minor tranquilizers is nine times as great as in 1954; beer consumption has also increased ten times and spirits consumption, six times (2:619). The number of analgesics users increases; hypnotics users decrease.
1970+	STIMULANT ABUSE INCREASE	Abuse of stimulants again begins to increase and spread out all over the country. The Awakening Drug Law is amended to increase penalties against violators and the control of stimulant materials (6:107).
1974	SLIGHT DECREASE	There is a reduction of about 30% from the number of offenses in 1973.
1975	APPARENT INCREASE	Figures for the six months between January and July show a "fair rise" in the number of persons involved in stimulant offenses; smuggling and illicit traffic is still active.

COMMENTARIES

The significance of the epidemic -- Brill and Hirose, The rise and fall of a methamphetamine epidemic: Japan 1945-1955, Seminars in Psychiatry (1969), pp. 179-80, 190.

> This outbreak, which was unique in many respects, constituted one of the most important chapters in the history of drug dependence. The term epidemic is often applied to outbreaks of drug abuse, but it is not often that the interaction of the classic factors of host-agent and environment are as clearly marked as they were in the Japanese experience. Methamphetamine was new in the country and there had never been a problem with drug dependence of any kind in Japan and only towards the end of the epidemic did other drugs of dependence begin to play any significant role. The epidemic followed a clear course of spectacular increase with a

COMMENTARIES (Cont'd)

sharp peak and rapid decrease after 1954-55.

One may identify the following series of hypotheses with respect to drug dependence that appear to merit continued study on the basis of the Japanese experience: (1) when supplies of a suitable drug are free and drug control is absent, drug dependence can assume epidemic proportions within a relatively short time; (2) the vulnerable population is concentrated chiefly among socially and economically disadvantaged young males living in great metropolitan slum areas; (3) it appears probably that even a very attractive drug of dependence can be controlled by appropriate social effort; (4) the abuse of any one drug may be checked, even after it has become very extensive, but there is reason to believe that the appearance of one drug of dependence in a population opens the way for others; and (5) the factors which favored the outbreak of the Japanese epidemic are those that have been associated with drug epidemics elsewhere. They include availability of a suitable drug, breakdown of social controls, and severe population pressure and social stress, such as poverty and mass migration (p. 190).

The effectiveness of strict law enforecement -- Brecher et al., Licit and Illicit Drugs (1972), p. 298.

"Japan, like Sweden, experienced an epidemic of excessive amphetamine use after World War II. According to reports by Japanese and American observers, Japan successfully curbed this epidemic by law-enforcement methods--sweeping arrests, stiff prison sentences and curtailing supplies. If true, this marks one of the few victories of law enforcement over drugs in the history of drug use. No on-site review of the Japanese experience was made, however, in the course of the research for this Consumers Union Report; and no objective evaluation of the Japanese experience was found in the medical literature available in English. Nor have we found any cogent explanation of why law-enforcement methods that proved counter-productive in the United States, in Sweden, and in other countries--against other drugs as well as the amphetamines--proved successful in Japan."

The effectiveness of strict law enforcement -- Smart, Effects of legal restraint on the use of drugs, Bull. Narc. (1976), p. 61.

"There can be little doubt that the total effort expended on all measures reduced the epidemic to manageable proportions. However, the relative contribution of legal, education, and rehabilitative measures has apparently not been assessed. As usual, it is impossible to conclude much about legal restraint per se."

The choice of intoxicant in Japan -- Kato, Epidemiology of Drug Dependence in Japan, Int. J. Add. (1969), pp. 616-618.

"The outbreak of methamphetamine abuse in Japan immediately after the war was closely connected with the anomic state at that time, and the abusers were in the beginning a few Bohemian artists and later mainly young delinquents. After the decline of methamphetamine abuse, caused by the amendment of the law, heroin abusers increased in number rapidly, and they were mainly the people of the lower classes and young delinquents; 50.3% of them were former abusers of methamphetamine. Among narcotic abusers, those who used medical narcotics (mainly morphine) were people of the highly educated, middle and upper-middle classes; in contrast, heroin abusers were members of the less educated, lower class. Hypnotic drugs (in particular methaqualone and analgesics) and allopyrabital abusers belonged to another group, i.e., young teenagers, with a peak at 15 years, who came from middle and upper-middle classes. (This phenomenon of transfer from elder to younger teenagers and from lower to middle classes is similar to the make-up of the delinquent group in Japan in general.) These drugs are shown to have been mainly abused by an acting-out group and partly by a social group but very little by a defensive group. Methaqualone and allopyrabital were abused in order to increase 'positive euphoria' and minor tranquilizers were abused for 'negative euphoria.'

"It is said that marijuana has been known in China since 300 B.C., but the Chinese had little use for the hallucinogen and referred to it disdainfully as a 'liberator of sin' because of its release of inhibition. The knowledge and use of the drug spread from China to India where bhang and ganja soon became part of the religious life. Why has marijuana never spread in Japan? Does it depend upon the Japanese attitudes not to despise material

COMMANTARIES (Cont'd)

pleasure in this world and never to renounce the active life? Or is it caused by the technical difficulties of smoking marijuana in groups in a closed room? In any case, the Section of Dangerous Drug Control, Japanese Ministry of Health and Welfare, has been very concerned to find cases of marijuana abuse....

"In regard to the other psychotomimetic drugs, LSD-25 in particular, we have never seen any abuser of this drug, although some psychiatrists have been carrying out LSD psychotherapy with schizophrenic patients for several years. Besides, almost all of the many youngsters who abused methamphetamine, heroin, methaqualone and allopyrabital sought a flight from reality, not the promotion of their creativity, nor for reaching 'enlightenment. And public attitudes in Japan are completely different from those in the United States where some 'scholars' insist that LSD can provide people with experiences which are extraordinarily enlightening, maturing, or in other ways beneficial. The Japanese 'Hippi' in the Shinjuku area in Tokyo uses such drugs as quinazolone and allopyrabital, but never uses any kind of psychotomimetic drugs. In regard to the possibility of marijuana abuse in the future, the writer cannot imagine that the curiosity of Japanese youths will allow this drug to be forever excluded from abuse; but LSD will much more likely be used by the asocial intellectual addicts than by young delinquents."

Stimulant abuse after 1970 -- Ishii and Motohashi, Drug abuse in Japan, Addictive Diseases (1977), p. 107.

Since 1970, the abuse of stimulants again began to increase and spread out all over the country. To tackle the situation, the Stimulants Control was amended to increase the penalties against violators and strengthen the control of stimulant materials. In 1974, a reduction of about 30% was shown in comparison with the number of offenses in 1973, and this reduction is thought to have been mainly caused by the strengthening of the penalties to make them as severe as those for heroin. However, it cannot be asserted that the abuse has begun to decrease substantially because, according to the record during the period from January to July 1975, the number of persons involved in stimulants offenses shows a fair rise in comparison with the number for the same period in 1974, and also because the smugglin and illicit traffic of the drug are still active.

The appeal of stimulants -- Ellinwood, The epidemiology of stimulant abuse, in Josephson, and Carroll, eds., Drug Use (1974), pp. 304-307, 326.

Superimposed on the subcultural use of amphetamines is the general widespread use among the major culture. At least part of the more widespread use of amphetamines is an expression of the general cultural emphasis of countries such as Japan, Sweden, and the United States on productivity and personal achievement. All three countries have a cultural emphasis on personal productivity and aspirations. All three have been involved in changing social values and patterns. Case histories show how a culture based on achievement can foster certain types (e.g., stimulants) of drug abuse [pp. 304-7]. Overuse of stimulants may be a price we pay for living in a highly competitive, achievement-oriented industrial society. Think of the high quantities of coffee, tea, and tobacco consumed by modern man to maintain his programed activity [p. 326].

Patterns of amphetamine use and effects -- Ellinwood, Epidemiology of stimulant abuse, in Josephson and Carroll, eds., Drug Use (1974), pp. 308-309, 318-319.

"There are at least two major routes of chronic amphetamine abuse: oral and intravenous. A person using the oral route of administration often takes the usually prescribed dose of the drug for several weeks before increasing the dose. He gradually increases his use of amphetamines over a period of weeks or months as tolerance develops. Increasingly he encounters insomnia and irritability at night and thus frequently uses sedatives or alcohol to sleep....

"Both oral and I.V. use of large doses of amphetamines produce a general sense of well being. Most amphetamine abusers initially note an increase in gregariousness and a sense of cleverness, 'crystal-clear thinking,' and invigorating aggressiveness, along with a feeling of ability and at times invulnerability. Any ambivalence, depression, psychasthenia, or fatigue is magically abolished. Because tolerance is quickly developed to these positive

COMMENTARIES (Cont'd)

effects of the drug, one needs to increase the dosage to recreate the effects.

"The other major pattern of use is one in which the individual injects I.V. doses of amphetamine (usually of methamphetamine in the United States) at short intervals and in immense quantities (up to 2,000 mg. per day) over a period of 4-6 days, during which times he does not sleep...Many addicts, in explaining their prolonged periods of sleeplessness, state that the experience itself is an ineffable one in which there is a 'need' to continue the experience. Quite often they are so totally engaged in the task at hand that they will continue to use amphetamines, thus prolonging their repetitious activities....

"Gradually the user becomes more tense, tremorous, and irritable as the run progresses; at that point, he may stop using the drug, pass out from exhaustion, or take a sedative or narcotic. Then he usually sleeps for 24 to 48 hours, wakes up ravenously hungry, eats large quantities of food, and then starts the process all over again. Whereas the oral use of amphetamine produces a sustained sense of euphoria associated with an energizing effect, the I.V. use of amphetamine produces an immediate, ecstatic, exalting, orgiastic experience. (p. 308-9).

"Amphetamine has a moderate to severe addiction-abuse potential, depending on the route of administration. Amphetamine certainly is not overwhelmingly addicting if one considers the number of people who are inoculated with the experience each year (perhaps the same could have been said for narcotics prior to the Harrison Act). Abuse involvement appears to be remarkably high with amphetamines: once the person has developed an abuse pattern, he becomes severely dependent and entrenched. Abuse persistence is not as great with heroin, and there is a tendency for amphetamine addicts to burn out within 2-3 years."

"With amphetamine use there is the danger of a rapid epidemic-like process that can sweep thousands into its path. Crime-inducing aspects of amphetamine abuse have been recognized by the Japanese and the Swedish. Inghe described an "aflameness" to criminal activity. Smith described the illegal marketplace for amphetamines in the United States and the capacity of this marketplace to rapidly criminalize great numbers of middle-class youngsters. Amphetamine abuse is known to induce violence, particularly among violence-prone cliques such as motorcycle gangs. 'Hells Angels,' for example are known for their speed use. The interaction of amphetamine in such groups who already have the potential for violence is alarming especially when amphetamine is combined with large quantities of alcohol. Swedish and Japanese investigators describe the production of amphetamine abuse....The impact of amphetamine abuse on society cannot be measured solely in terms of statistics. Amphetamine abuse also affects the ideas and feelings that a culture has about itself. To be accurate, one should consider the interplay of drug subcultures against the major culture and especially the effect of this dissonance on the social value systems that hold a society together--the 'cultural glue'....At present, if a person is having difficulty identifying with the general culture, initiation into the speed clique or into Hell's Angels could provide a similar solid negative identity; most participants describe these experiences as meaningful or intense. The values most antithetical to our prevailing culture...are aimed at (a) the success orientation; (b) the sterile, clean, immaculate nature of our middle-class life; (c) the less than overwhelmingly humanistic orientation of our major social institutions; and (d) rationalism itself. Excessive drug use and loyal opposition to the established culture often appear to go hand in glove and, in fact, tend to potentiate each other" (pp. 318-319).

Amphetamines vs. cannabis: mirror images -- Grinspoon and Hedbloom, Speed Culture (1975), pp. 282-289.

"There is a curious mirror-image relation between cannabis and amphetamines. Marihuana is not addicting, and there are no serious sequellae upon cessation of chronic use; the amphetamines have a withdrawal syndrome which often includes severe depression. Cannabis does not damage tissue; amphetamines may. There are no well-documented cases of death from marihuana; speed can kill. Marihuana is not criminogenic and being high on it probably diminishes the likelihood of violent or criminal acts; just the opposite is the case with amphetamines. Cannabis in very large (usually ingested) doses can produce toxic psychoses and in smaller smoked doses may in rare instances precipitate functional psychoses in people who are already vulnerable, that is, people in whom psychosis might be precipitated by such events as an alcoholic debauch, an automobile accident, a surgical procedure, or a death in the family. It has been demonstrated that a psychosis which is all but indistinguishable from a schizophrenic

COMMENTARIES (Cont'd)

reaction can be induced with amphetamine in 'normal' subjects in the laboratory, and paranoia is common among speed freaks on the street. Amphetamine leads to the use of other psychoactive drugs; cannabis does not. The risks involved in using marihuana (excluding those which derive from its legal status) are of a different order of magnitude from those which arise from the psychopharmacological properties of amphetamines. In fact, the dangers mythically attributed to use of cannabis are more appropriately associated with amphetamines. Yet there has been an enormous concern and near hysterical outcry over the use of marihuana, while public, governmental, and medical attitudes toward the use of amphetamines have ranged from enthusiasm to complacency; only recently has there been some degree of concern...

"Amphetamine...for most of its short history has enjoyed the unequivocal enthusiasm of the pharmaceutical industry and the medical profession. Only in the past few years has the medical establishment begun to be concerned about the consequences of its romance with this drug. The most important factor in public acceptance of amphetamines was the reception accorded them by the medical profession. As long as the medical community was willing to accept the manufacturers' claims, no one questioned why this new psychoactive 'medicine' could be marketed without any proof of safety or efficacy....

"Thus, in the mid-1930s, while marihuana was being brought to the public's attention as a menace capable of wreaking great havoc, amphetamines were introduced and promoted as perhaps the earliest technology-derived drug to provide 'better living through chemistry.' Amphetamines were products of modern technology; they came from the laboratories of great corporations, and, in the days before the growth of consumer skepticism, this lent them legitimacy; unlike the dangerous foreign weed, they seemed to have reliable, safe, known properties. And, of course, they had the backing of medical authority.

"Other cultural factors help perpetuate the mirror-image relation of attitudes toward cannabis and amphetamines. Societies tend to sanction for social use those drugs whose psychopharmacological properties accord with their ideas of acceptable behavior and performance. Cannabis has been accepted for centuries among the Brahmins in India, whose cultural background and religious traditions support introspection, meditation, and bodily passivity. This introspective, nonaggressive stereotype is opposed to Western cultural patterns. The West, with its emphasis on achievement, activity, efficiency, speed, and aggressiveness, finds amphetamine more compatible with its values."

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29

Stimulants
Sweden
1938-1970

BACKGROUND

As in Japan, Sweden had few problems with drug abuse (except for alcohol) before World War II, when stimulant use began to increase. As Ellinwood comments below, there are also a number of sequential parallels between these two drug epidemics. The Swedish experience and the various measures taken to regulate stimulant abuse have been the subject of considerable discussion. Brecher views it as a prime example of how overreactions and extensive publicity engendered in the course of control attempts can actually help stimulate further drug abuse and trafficking. Bejerot emphasizes it demonstrates that once a drug subculture develops, strict legal controls over drug availability and use are necessary if an epidemic is to be prevented. He refutes that exceptional publicity was given or that authorities overreacted, arguing rather that measures against drug use were too little and too late so that when the diversion of medical supplies was finally stopped there was already a large number of addicts who were prepared to pay high prices for drugs smuggled in from abroad. The Swedish experience is particularly interesting as it had several discreet periods of time when policies varied in the amount of restrictions on the prescribing of stimulants. From 1940 to April 1965 was the period of traditional restrictive drug policy in which ambulatory prescribing of stimulants was extremely rare; April 1965 to June 1967, a more permissive drug policy was applied which involved the intensive prescribing by about 10 physicians to more than 200 patients, much of which were diverted to other users. July 1967 brought a return to the traditional restrictions and in January 1969 an extremely restrictive drug policy was employed which increased penalties for narcotic offenses.

CHRONOLOGY

1938	INTRODUCTION	Amphetamines are first placed on sale and widely advertised as pep pills; "Two pills are better than a month's vacation" (5:3). The risk of dependence is considered low (12:27).
1939	USE RESTRICTED	Amphetamines are placed on the list of drugs available by prescription only.
1942	THERAPEUTIC USE SPREADS	Therapeutic use becomes widespread. Sales have increased 20-fold in 5 years; the drug is prescribed to about 3% of the population. But a survey indicates most are using amphetamines sensibly and in moderation (1:187).
1943	WARNINGS BEGIN SALES DECREASE	National Medical Board issues a warning to physicians; mass media begins to publicize risks. Sales decrease 40-60% (5:3).
1944	ADDED RESTRICTIONS	Only 200 users (less than 1/10th of 1% of all users) are labeled "abusers," but growing concerns over misuse lead the government to place the prescription of amphetamines under strict legal restriction by including them in the Swedish Narcotic Act (6:4).
1946-9	NONMEDICAL USE	Sales drop by one-half for a few years. Oral abuse rises in Stockholm, especially among bohemian circles. A black market and amphetamine-centered subculture develops (1:187-189; 6:7; 2:237).
1949-50	USE SPREADS	Abuse spreads among maladjusted and criminal youths.

CHRONOLOGY (Cont'd)

1950-4	PARENTERAL USE	Intravenous abuse begins, spreading into criminal, asocial groups among whom use becomes endemic. Reports of drug cases are still relatively low in number, about 200 (1:189; 5:23; 3:237).
1956	PRELUDIN USE BEGINS	Faced with restrictions and the high price of amphetamines, use of the newly introduced phenmetraline (the reducing pill Preludin) begins as an amphetamine substitute (3:252). Abuse of stimulants spreads from Stockholm to Gothenberg.
1957	COURT SENTENCES	Between 1948-1957, 13 sentences for drug offenses are passed.
1957-60	RAPID ABUSE INCREASE	Period of rapid increase in number of drug abusers, particularly among juveniles. Increase in illicit supplies allows increase in nonmedical use and spread to other urban centers and younger people (7:20, 24, 35).
1958	CONTROL	Amphetamines formally classified as a narcotic drug.
1959	RITALIN USE	Other amphetamine substitutes, such as methylphenidate (Ritalin) are being used, mainly by injection (13:252).
	CONTROL	Preludin and Ritalin are included on the National Narcotics Drug List. A special prosecuting attorney is appointed to concentrate on drug-law enforcement.
1959-60	SALES DECREASE; SMUGGLING INCREASES	A reduction in the sale of stimulants occurs; the illegal importation of Preludin increases (7:20).
1960	USE SPREADS	About 1,000 people in Sweden are abusing stimulants. A warning is issued by the National Medical Board to all doctors on the types of drugs abused. Marihuana use also appears for the first time (8:15).
1961-2	RAPID RISE	Drug abuse rises rapidly; drugs are being obtained mainly by diversion of legal prescriptions (7:24).
1962	STRICTER CONTROLS	The Narcotic Drug Act comes into effect (1/1/64) with a maximum sentence of 2 years imprisonment for drug offenses (later reduced to 1 year). The number of prescription violations decline, but they rise in 1964, probably due to increased police and prosecutor activity directed at finding violations (7:24).
1964	CRITICISM BEGINS	Criticism against the traditionally restrictive drug policy begins.
1965	PRELUDIN BANNED	Preludin is banned, addicts begin substituting Ritalin or amphetamines; smuggling of Preludin increases.
	USE SPREADS	1 of 5 persons arrested in Stockholm is taking amphetamines intravenously, the principal group being 20-30 year old males (2:242). National Committee for Help to Drug-Dependents (RFHL) is formed.
1965-7	PRESCRIPTION POLICY LIBERALIZED	Opiates and amphetamines become legally prescribed in the belief that the situation for abusers of society would improve. Large supplies become available through the excessive prescriptions of a few physicians. Over 4,000,000 doses are

CHRONOLOGY (Cont'd)

		prescribed in 1966 (4:174). One physician alone prescribes more than a quarter of prescribed amphetamines. Much of these legally purchased drugs end up on the black market.
1966-7	EPIDEMIC PEAKS	Increase is at its height: 1 of every 3 persons arrested in Stockholm is using amphetamines intravenously; diagnosed cases of intravenous abuse more than double; there is a 10-fold increase among youngest (15-19) and oldest (40-44) groups in one survey (5:242-3). It is estimated at the end of the 1960s that about 10,000 persons are misusing injectable forms of amphetamines, mostly males living in Stockholm with histories of crime and social instability. Use spreads among urban teenagers in general (10:13-14).
1967, July- 1968, Dec.	LIBERALISM ENDED	Pre-1965 restrictive drug policy reinstated; maximum penalties are increased (doubled in most cases); the police force is doubled (2). The maximum penalty for drug crimes increased to 4 years in prison.
c. 1968	SPEED LABS ESTABLISHED	As smuggling controls become more effective, clandestine "speed labs" begin to manufacture amphetamines (1:190).
1969, Jan.	STRICTER CONTROLS	Government approves a 10-point program increasing public efforts against drug abuse. Police efforts against illicit trade are given highest priority, and the number of police is increased by a factor of 4.6 between 1968 and 1969. Stricter penalties are imposed on law violations, and a Joint Committee is formed which includes the National Police Board, the office of the Chief Public Prosecutor and Prosecutor of the Supreme Court; the National Social Welfare Board, the National Board of Customs, and the National Board of Education (8:15-16).
1969 Spring	PUBLIC CAMPAIGN	Committee disseminates information about narcotics to the public.
	EFFECTS	Police and public campaigns produce an "immediate" effect on curbing the illicit traffic; drug prices rise, reports increase of a growing tendency for addicts to volunteer for treatment; the market structure becomes well known and the police claim success in acting against it (8:17).
1970+	USE STABILIZES	Amphetamine abuse declines in metropolitan areas to about 10,000 users, but LSD and heroin use appear and cannabis use increases. The demand for narcotics is great, prices are high, but statistics indicate a reduction in crime in some areas (8:17-18). The black market, however, still flourishes (9:297).

COMMENTARIES

Apparent success -- Esbjornson, The drug problem in Sweden--from the police point of view. Bull. Narc. (1971), p. 17.

There is every indication that the number of addicts had become constant at the beginning of 1970. It is difficult to determine if there was a decline, but at least there had been no increase. Three reasons contributed to this: (1) the shortage of drugs meant that established addicts no longer were willing to offer them to inquisitive beginners; (2) prices

COMMENTARIES (Cont'd)

were so high persons without an established need did not regard the experience as worth the price; and (3) it was no longer "in" to try drugs because of public information dissemination against drugs. Also, the geographic spread of this "infection" had been contained, although there was a disturbing rise of LSD and heroin use.

The liberal experiment -- Bejerot, Addiction and Society (1970), pp. xv, xix.

> "The year 1965 saw the commencement of a period of confusion in the Swedish addiction debate and policy. A little group of people preaching a liberal drug policy conducted a remarkable and dramatic campaign and induced almost all mass media to support them. This group succeeded in forcing through measures which were completely at variance to psychiatric experience and the views expressed by a number of initiated specialists. One result was an unsuccessful and poorly planned treatment experiment with liberal prescriptions of drugs to addicts for intravenous self-administration. The campaign itself and the conversion of the intravenous abuse of drugs into a form of treatment upheld by the highest medical authority, the Board of Health, resulted in a marked rise in the popularity of the abuse. Extensive and biased publicity around the experiment contributed in no small measure to this effect" (p. xv).
>
> "Since ancient times we have known that in serious diseases which are dangerous to the individual and to society, which are highly infectious and resistant to treatment, prevention is the most important approach. We need a planned, broad, well-integrated treatment, rehabilitation and prophylactic program carried out with energy and decisiveness. There is a danger that isolated, symptomatic measures may make the situation worse. These measures can lull the authorities and the public into the impression that something effective is being done about the problem. In addition poorly planned, half-hearted action may result in an increase in the virulence of the epidemic; the illicit trade has time to develop and reorganize; the discrepancy between increased, but still moderate, risks and enormous profits would stimulate the illicit trade and large-scale manufacture of drugs, and the addicts may leave their haunts and go underground. Left to its own dynamics, epidemics expand rapidly, as happened in Japan in the fifties and in Sweden during the golden years of the liberal drug policy 1965 and 1968" (p. xix).

The success of the extra restrictive policy -- Bejerot, Drug Abuse and Drug Policy (1975), p. 211.

> "The analysis of the factors influencing recruitment supports the theory that a rapid rise in signs of intravenous abuse, absolute as well as relative, noted in the arrest population in Stockholm...corresponds to a rapid expansion in this form of abuse in society (Stockholm area).
>
> "Further, the analysis suggests that a considerable fall in signs of intravenous abuse, absolute and relative, observed in the arrest population in Stockholm...is not an apparent effect due to increased deprival of liberty among abusers of intravenous type, but corresponds to a real fall in signs of intravenous abuse in the Stockholm arrest population and the drug subculture from which a considerable part of this clientèle is required.
>
> "The analysis shows that it is difficult to find any explanation for the sudden fall in intravenous abuse in 1970 other than the measures taken against the illicit drug trade in 1969 and the further stringency in legislation against grave narcotic crime introduced at the same time.... This interpretation is also supported by a marked rise in drug prices on the illicit drug market at the same time; these almost doubled from 1969 to 1970."

The epidemic's significance -- Inghe, The present state of abuse and addiction to stimulant drugs in Sweden, in Sjöqvist and Tottie, eds., Abuse of Central Stimulants (1969), pp. 210-211.

> "It has taken us nearly thirty years to entirely forbid the use of central stimulants unless by special license in cases with very definite indications. Certain slimming preparations are still free, even if they have been placed under observation. During this time an originally completely legal but now unconditionally illegal misuse of drugs has struck firm root. The position is now quite serious. Thousands of persons have become pathologically dependent. The illegal traffic has become well or firmly established, and

COMMENTARIES (Cont'd)

operates apparently with large resources. Development in Sweden can well serve as a warning to those countries which have not yet understood the nature of what has been looming and still disregard trends already evident within their own borders. Unless they act quickly and with determination they will soon find themselves in the same situation as Sweden."

Swedish policy: its effectiveness and misconceptions surrounding it -- Brecher et al., Licit and Illicit Drugs (1972), pp. 297-298.

"The outcome of Swedish efforts to suppress amphetamine misuse between 1942 and 1970 can now be objectively evaluated. Prior to the repression, 240,000 Swedes received amphetamines legally on prescription from their physician and used them occasionally and sensibly to help meet the minor crises of life--chiefly overtime work and feeling out of sorts or depressed. This occasional legal use of amphetamines has now ended. Yet the 'abusers'--200 of them in 1944--had by 1970 become an army estimated at more than 10,000--and many had become mainlining speed freaks. The question inevitably arises whether Sweden might not have been wiser in 1944 to try, quietly and without publicity or publicized warnings, to reduce the number of its 'serious' misusers from 200 to 150 or perhaps even 100, rather than trying to stamp out amphetamine 'abuse'....

"But if the facts are as here presented, what of the story, circulated in the United States for several years, that the Swedes had been tolerant of the amphetamines, had given them away free to addicts, and were suffering an amphetamine disaster as a direct result of this toleration.

"The facts are quite simple and uncontroversial. In 1965, after Sweden had exhausted all repressive approaches to the amphetamines and their substitutes, permission was granted to a group of physicians to supply modest numbers of the drug to users as a research project. Two physicians exceeded the limit, so that as many as 250 or 300 users may have been supplied with amphetamines....

"Thus Sweden's problem has been blamed in the U.S. on the experimental prescription of amphetamines to a few hundred users in a dispensing project following rather than preceding Sweden's amphetamine explosion."

Policy evaluation -- Smart, Effects of legal restraint on the use of drugs. Bull. Narc. (1976), pp. 62-63.

Unlike most other areas of the world, Sweden had several discreet periods of time varying in the amount of restriction on the prescribing of stimulants. However, the effectiveness of the change in prescribing practices is more difficult to interpret because of the concomitant legal changes and the increased police activity on drug cases.

Sociocultural influences on drug use, 1965-1975 -- Sjöberg, Addiction in Sweden, J. Drug Issues (1975), pp. 14-15.

"In order to understand the rapid growth of misuse among young persons one needs to know about changes that have taken place recently in Swedish life. The last decade has seen an unprecedented concentration of population. Occupational opportunities for agricultural and forestry workers have diminished and people have moved into the large towns seeking industrial jobs. This urban population growth has required a large increase in the construction of housing. The housing shortage was eased during the 1960s partly by the construction of new suburbs for tens of thousands of people, mostly families with children. The total number of children in individual apartment blocks was consequently high. During recent years growing numbers of women have obtained employment, so that parents have been less able to keep an eye on their children. And shopping and recreational facilities have been centralized, thus increasing anonymity. In a word, the usual and expected social controls have not operated...

"The school system's ability to nurture pupils...has been weakened in that large central schools for pupils of fourteen to sixteen years of age have often been built far away from where students live. Pupils, no longer having one classroom of their own, wander from room

COMMENTARIES (Cont'd)

to room for instruction in particular subjects. Teaching systems requiring many teachers have been introduced into the early school years. Parents' interest in their children's schooling has diminished, especially in the upper classes. Truancy has increased.

"Industrial growth and trade union achievements have benefited many Swedes economically, and because many women have become wage earners, families have become able to buy expensive cars and color television sets and are generally able to maintain high economic standards. Young persons, at the same time, have increased their buying power either through their own earnings or through larger allowances of pocket money from their parents. Thus while people have enjoyed better economic conditions and more freedom, families and schools have become less capable than they once were of bringing up children or of molding their growth.

"A youth culture that in many respects opposes the values of the adult world has come into being as a consequence of the increased purchasing power and independence of young people. Parents feel themselves to be more and more 'shut out of it' and do not know how to respond to their children's claims, or how to accept their behavior. It has become natural for children to assume adult habits, both good and bad, in their use of intoxicants, their sexual conduct, and so on."

Factors underlying amphetamine epidemics -- Ellinwood, in Josephson and Carroll, eds., Drug Use (1974), pp. 304, 323.

"In summarizing the Japanese, Swedish, and American experience, several sequential factors seem to be involved in establishing a stimulant-abuse epidemic. These factors are as follows:

1. An initial oversupply of amphetamines that find their way into both the legal and illegal markets, often in injectable form.
2. The initiation or innoculation of large segments of the population to amphetamine effects from their use for medical purposes, for recreational purposes, or for their anti-fatigue properties.
3. Widespread dissemination of knowledge and at times proselytizing of the amphetamine experience.
4. The development of a core of chronic amphetamine abusers who establish a reliable illegal market for amphetamines.
5. Increasing use of the parenteral route for amphetamine administration.
6. The development of multiple 'garage' laboratories manufacturing amphetamines to compensate for government curbs on the legal supply.

"The environmental substrata on which this process takes place also have remarkable similarities in the three countries. All three countries have a cultural emphasis on personal productivity and aspirations. All have been involved in changing social values and patterns" (p. 304).

"The literature on amphetamine abuse indicates that abuse of this drug tends to develop along the lines of an epidemic and that more incisive studies are needed to define the nature of these epidemics as well as the endemic condition. Compared with other epidemics, the analagous conditions underlying the spread of amphetamine abuse are as follows:

1. Temporal characteristics are consistent with those of many infectious epidemics.
2. The spread of amphetamine abuse is highly contagious at certain phases of the 'epidemic.'
3. The ample initial supply or oversupply of the drug 'agent' often triggers the initial abuse phase.
4. The environmental-cultural setting often has common factors across amphetamine epidemics in different countries.
5. Initiation of the peak phase of the 'epidemic' follows the establishment of an 'agent reservoir' or adequate market of the drug from illegal laboratories" (p. 323).

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30

Opiates
United States
1840-1914

BACKGROUND

As in England, a relatively high level of opium consumption was established in the United States during the 19th century. As Brecher and his associates write, America at this time could "quite properly" be called a "dope fiend's paradise" (15:31). There were no restrictions on importation other than a tariff; opium and morphine were cheap and readily available without prescription, particularly as ingredients in countless multidrug patent medicines or nostrums which were widely advertised and used as "cures" for every conceivable ill. Habituation to opium was considered undesirable and not respectable, but concern over the abuse, and even the use, of alcohol began much earlier than any serious concern over opium. Most users were respectable middle-aged, white, middle-class women, or white Southern males, all of whom used the drugs for medicinal purposes and obtained their drugs legally.

From the mid-century, again as in England, several events began to alter the traditional picture of opiate dependency and both the use and the concern over opium increased substantially. Various researchers have emphasized such factors as the introduction of morphine (isolated in 1803), and the hypodermic needle; widespread medical use of morphine during the Civil War; increasing advertising, overprescription, and use of opium-bearing patent medicines; the introduction of opium smoking by Chinese immigrants and concern over cocaine use by blacks; the prevailing spirit of moral reform as illustrated also by the temperance and Progressive movements; the increased understanding of the habituating phenomenon of opiate use; America's direct involvement with the opium problem in the Philippines; and the discovery of nonaddictive pain killers and anesthetics which decreased the reliance on opium preparations for the relief of pain. By the turn of the century there was widespread concern among the public and the medical profession over control of proprietary medicines, many of which were not labeled in 1906, and the problem of overprescription of morphine and opium; the first federal regulatory law, the Pure Food and Drug Act, was enacted principally to protect unwary users of patent medicines from becoming habituated. Still there was little support for a law banning opium, except for smoking. Thereafter, opium began to be increasingly associated with crime and alien elements and was attacked as the "demon flower," and its users as "dope fiends." In 1914, Congress passed the nation's first federal antinarcotic legislation, the Harrison Act.

This perspective provides a general overview to the developing concern over opium use in this period and some of the factors which influenced the passage of the Harrison Act, particularly the concern over medical abuse and the close relationship between international and domestic policies. The influence of the fear of opium smoking in this process is treated in the next perspective. The history of narcotic use and law enforcement following the Harrison Act is chronicled in perspective 32. Perspective 33 discusses the related fear of cocaine use by blacks and its influence on early 20th century attitudes toward drug use. It should be noted that the first attempts to obtain a federal antinarcotics law were severely hampered because federal control over narcotics use and prescription practices of the medical profession were thought to be unconstitutional. Indeed, there was uncertainty over the constitutionality of federal laws in the whole area of morals. But during this period, federal commerce and tax powers were being broadened by Supreme Court decisions, indicating that federal police power under the guise of tax or interstate commerce powers were possible. It was for this reason that the Harrison Act was ostensibly a tax act. Furthermore, the whole contemporary Progressive movement was propelled by a belief that legislation was an effective tool for achieving moral reform; political efforts at every level of government were organized to implement this belief. The framing of the antinarcotic laws thus paralleled the widening possibilities open to Congress in the area of policing morals (6:10).

CHRONOLOGY

1840	IMPORT DUTY	First U.S. statute taxing the importation of opium is passed.
1850	CHANGES BEGIN	The immigration of Chinese laborers brings the habit of opium smoking (see persp. 31). Changes begin to appear in the patterns of use and attitudes toward use. Both the incidence and the awareness of dependency begin to increase.
1853	HYPODERMIC NEEDLE	The hypodermic needle is developed by Alexander Wood, thus making possible the ingestion of morphine into the body, which increases its physiological effect.
1860-65	CIVIL WAR; MORPHINE	The Civil War has long been credited as a catalyst for the onset of drug addiction in the United States because morphine was first administered freely to veterans for the purpose of relieving pain. So widespread was the problem that opiate use was called the "army disease" (12:71). Recently, however, considerable doubt has been expressed as to whether the war had any significant contribution in increasing opium or morphine use (5:1016; 6:251).
1865+	USE INCREASES	The limited statistical data provides evidence that the use of opiates became widespread and "uncontrolled" between 1865-1914 (5:1010). Widespread advertising begins to create an unregulated patent medicine craze (9).
1868	OPIUM PRAISED	Dr. George Wood, professor of the theory and practice of medicine, describes the pharmacological effect of opium as creating an elevation and expansion of the whole moral and intellectual nature. Claiming that "the intellectual and imaginative faculties are raised to the highest point compatible with individual capability," he concludes: "It seems to make the individual, for the time, a better and greater man" (6:71-2).
1870-80's	PATENT MEDICINE CRAZE	Through extravagant advertisements the patent medicine craze peeks with the opiate content of the medicines at its highest point. A rapid rise in opium importation begins, outstripping the increase in the annual population (6:2-3). First warnings against morphine (isolated 1803) begin to appear in English literature as exemplified by Clifford Allbutt (6:73-4).
1874	HEROIN	C.R. Wright synthesizes heroin in London; it becomes recommended as less likely than morphine to produce nausea and dangerous respiratory depression (10:112).
1880's	LOCAL REGULATION	Moderate concern over opium use spreads; beginnings of local regulations against nostrums. In 1880, one survey of opium "eaters" finds females outnumber males 3 to 1; calling its chronic use a "vice," the report admits most would not agree (11:12).
1883-5		Iowa survey finds 3,000 stores where opiates are on sale (12:18).
1884-93	LIMITED CONCERN	Despite increased concerns, during this period only 20 items relating to opiate dependence appear in the Journal of the American Medical Association.
1887	IMPORT CONTROL	Importation of smoking opium forbidden (see persp. 32).

CHRONOLOGY (Cont'd)

1889	USE PATTERNS	Dr. J.R. Black declares that morphine is less inimical to healthy life than alcohol: it calms instead of exciting, it is less productive of acts of violence or crime; it is less costly and less likely to cause disease (14:183; 15:8). A Massachusetts survey indicates widespread use of morphine, with the most sales of opium derivatives to people with high incomes (12:468).
	W.S. HALSTEAD	Dr. William Stewart Halstead (d.1922), a renowned physician and secretly a morphine user, helps found Johns Hopkins Hospital. Halstead continues to use morphine in large doses throughout his highly successful surgical career (15:33-35, 37).
1890s	LOCAL REGULATIONS INCREASED	State antimorphine laws increase (6:47); in 1890 the tariff on smoking opium is raised from $10 to $12 per pound.
1896	IMPORT PEAKS	Opium importation peaks; subsequently, a decline sets in until, by 1914, the level has fallen back to the level of the 1800s possibly because of increasing fears and possibly due to market saturation (6:2-4).
c. 1898	MEDICAL USE OF HEROIN	Heroin begins to attract more attention, with many claiming it is as free from addiction-forming properties. There is little evidence that it is ever widely considered as a substitute in the treatment of morphine addicts (4). In 1900, G.M. Gould, American Yearbook of Medicine and Surgery reports favorably on heroin use in the treatment of coughs and to relieve the sensation of air hunger, but admonishes "for the present, small doses should be used and administered with some care, as the toxic properties of the drug are not thoroughly known."
c. 1900	USE SPREADS; CRIME ASSOCIATIONS	Opiate addiction becomes increasingly identified with "underworld" white slavery and organized crime, especially among Chinese tongs (10:110). It is estimated that the addict population is about 250,000; less reliable estimates range from 400,000 to 4,000,000 out of a population of 80,000,000 (6:5; 12:28).
	OPIATE CURES	Although fear over such widespread use continues to increase, the period is also one of general confidence that addiction is eminently curable; many sanitariums are set up, the leading "cure" figure being Charles B. Towne. Many clinicians believe addiction is a disease which can be cured; before and during World War I numerous cures are announced and old claims perpetuated (6:58ff; 31).
1901	HEROIN LAUDED; OPIUM CONTROLS URGED	M.B. Ahlborn publishes testimony to the virtues of the medical use of heroin (6:73). The U.S. Senate passes a resolution concerned with the need for national and international action to protect uncivilized people from opium and alcohol (29:57).
1901-1914	PROGRESSIVISM	Era of Progressive reform and stable prosperity. A period of hope among the politically articulate middle class that the government can change or neutralize the habits of large groups by well-written legislation and honest enforcement (6;66); an organized political effort begins on every level of government to use legislation to achieve moral reform (30).

CHRONOLOGY (Cont'd)

1902	HEROIN WARNINGS	Warnings against heroin increase (11:8).
1902	PHILIPPINE OPIUM PROBLEM	The U.S. has acquired the Philippines as a result of the Spanish-American War (1898); Reverend Charles H. Brent arrives on the island and sets out to do something about its opium problem. The Philippines previously had a governmental system for licensing addicts and supplying them with legal opium. Bishop Brent, appointed to study alternatives to this system, expands the study to encompass the entire Far East. Also appointed to the Opium Commission is Dr. Hamilton Wright, the "father of American narcotic laws" (6:25 ff; 17; 18; 24).
1903	USE PATTERNS	An American Pharmaceutical Association study of communities in the U.S. and Canada concludes that while the increase in drug usage is most evident within the lower classes, "the statistics of institutes devoted to the cure of habitues show that their patients are principally drawn from those in the higher walks of life" (16:481).
1904	BOYLAN ACT	The New York State Legislature passes the Boylan Act, the first comprehensive piece of legislation aiming at more control of opium derivatives.
1905	PHILIPPINE BAN	In March, Congress passes the Philippine Tariff Revision Act which orders an immediate opium prohibition for Filipinos, except for medicinal purposes; within three years the law also becomes applicable to non-Filipinos (Chinese) on the island.
	AMA CONCERN	AMA Council on Pharmacy and Chemistry is established, aiming to reveal the menace of narcotized proprietors. Expanded research into drug abuse is undertaken (31:601).
1906	INTERNATIONAL CONFERENCE URGED	In July, Bishop Brent writes to President Roosevelt urging an international meeting of U.S. and other great powers with interests in the Far East to help China with its struggle against opium trafficking. Brent argues that only after this is done can the forthcoming opiate prohibition in the Philippines be effective. Roosevelt strongly supports Brent's efforts to make the U.S. a world power.
	LEGISLATION URGED BY WRIGHT	As plans are made for the Shanghai Conference in 1909, concern grows over the "embarrassing" fact that the U.S. itself does not have a law to deal with the opium problem; some legislation is felt necessary "to save face" at the conference. Hamilton Wright begins to emphasize the critical danger of opiate use in the U.S., often employing racial slurs (6:33-3). Wright is heavily influenced by the widespread belief that opiate addiction was an eminently curable disease (31:602-3).
	PURE FOOD AND DRUG ACT	A drug journal estimates that 50,000 patent medicines are being sold, almost double the figure for the previous year (9:109). The first Pure Food and Drug Act becomes law, requiring the listing of all narcotics, including cannabis, on the labels of patent medicines shipped in interstate commerce. Within a few years, patent medicines containing these drugs dropped a third in sales (6:22).

CHRONOLOGY (Cont'd)

1909	SMOKING OPIUM EXCLUSION ACT	Wright's efforts to secure antinarcotic legislation before the Shanghai Conference are successful. In February, on the eve of the Shanghai Opium Conference, the U.S. prohibits the importation of opium for smoking or nonmedical use. When the conference is convened, Bishop Brent is chosen its chairman. It ends with a resolution to promulgate international control everywhere. Late in the year, Wright urges control of the drug traffic through federal taxation powers (6:31, 41).
	TOWN'S CURE ADVOCATED	In the official report of the Shanghai Opium Commission to the State Department, a description of Dr. Town's curative regimen is appended, in effect signifying government approval and recognition of the value placed on cure by those proposing prohibitive laws (31:603). (On this subject, see commentary, persp. 32.)
1910	FOSTER BILL; ATTACKS INCREASED	The Foster Bill, the direct antecedent of the Harrison Act, is submitted to Congress. Drafted by Wright, the bill calls for uncompromising controls over the opiate trade. It immediately runs into trouble with those who fear the precedent of federal involvement in the police powers reserved to states; it is also attacked by druggists as a threat to the everyday routine and sales in the drug trade (6:45-48). Wright and others intensify their campaign to stress the evil of opium, dramatically maximizing the danger of the situation (6:343-4). The mythology of the drug fiend and the demon drug begins to take shape (3:393-4).
		Wright finds that in dry states, morphine sales over the previous ten years have increased 150%; patent medicines containing opiates have decreased in sales 25%-50% since the 1906 FDA (6:31-3).
1911	FOSTER BILL DEFEATED	Foster Bill defeated; on the final day of the Foster Bill hearings, President Roosevelt reiterates to Congress the obligation "to see that its house is in order" before the first International Opium Convention, which is scheduled to meet in the Hague that year (6:45).
1912	HAGUE CONVENTION	The Hague International Opium Convention recommends various measures for the international control of the trade in opium, including: (1) control of all phases of preparation and distribution of medicinal opium, morphine, heroin, and cocaine; and (2) greater attempts to control domestic traffic. Wright, the U.S. representative to the Convention, returns to the U.S. seeking the necessary domestic legislation to meet these recommendations; Frances B. Harrison agrees to shepherd the antinarcotic legislation through the House of Representatives; this time, more compromises are made than in the Foster Bill (6:54; 27:99).
1914	SMOKING OPIUM	As the 1909 prohibition of importing opium for smoking did not prevent diversion of medical opium within the U.S., a new law establishes a prohibitive licensing fee and tax on the manufacture of smoking opium (2:154).
	HARRISON ACT	Twenty-seven state and city laws now prohibit smoking opium (see persp. 31). By this year, prominent newspapers, physicians, pharmacists, and Congressmen have come to believe

CHRONOLOGY (Cont'd)

that opiates and cocaine (see persp. 33) predispose habitués toward insanity and crime; the only remaining question publicly debated is how to control (not, as in the case of liquor, whether to control). Both the public and Congress maintain a clear distinction between narcotic control and liquor prohibition, with the combatants in the fight against narcotics often divided on the liquor question (6:65-8).

1914 (Cont'd) HARRISON ACT

On December 17, the President signs the Harrison Act. Ostensibly the act is a tax measure designed for the control and orderly marketing of opium. It imposes harsh controls but leaves open the issue of medical prescribing of narcotics. The three central parts of the act state: (1) Anyone engaged in the production or distribution of narcotics must register with the federal government and keep records of all transactions with drugs; (2) All parties handling the drugs through either purchase or sales must pay a tax; (3) Unregistered persons can purchase drugs only on prescriptions from physicians, and such prescriptions must be for legitimate medical use. The dispensing or distribution of opiates and cocaine is not prohibited to patients of registered physicians "in the course of their professional practice."

The bill represents a number of compromises compared to the stricter Foster Bill; records are simplified and physicians are allowed to dispense drugs if in the attendance of patients. The act attempts to distinguish between legitimate and illegitimate prescriptions by physicians. Still, there is considerable debate among affected groups of its practical significance; there is no general agreement on what would be desirable or actual enforcement of the law (1:59-61). As a tax measure, the enforcement of the law is placed under the Bureau of Internal Revenue.

COMMENTARIES

Opiate use and the Civil War -- Quinones, Drug abuse during the Civil War, Int. J. Add. (1975), p. 1019.

> "From a careful review of the existing literature, there is insufficient evidence to credit the Civil War as the catalyst for the onset of drug addiction in America. On the contrary, it is clear that while the Civil War may have contributed to the problem, drugs were already on the scene and being consumed at alarming rates long before the start of the war. Also, it is difficult to single out one specific group as the causative agent, since there is equal evidence that other groups besides soldiers and veterans were also involved in the drug scene. It seems that Musto's figures on the extensive importation of opium following the war sharply negate this hypothesis. One then must agree that the war became a convenient scapegoat for the growth of addiction in America.
>
> "There is an obvious need for critical study into military medical records, veterans hospitals, old soldiers' homes, and Pension Bureau records in order to make a more valid assessment of the extent of drug addiction during the Civil War. Much of what exists is in most instances not well documented. There is at least some disagreement (Musto) as to whether the Civil War did *in fact* have a major impact on the spread of opiate addiction in America....
>
> "Also of interest is the minimal association between crime and addictions following the Civil War. There seems to be no established association between these two phenomena during this period of history. Perhaps the only explanation that can be offered is that federal controls were not attempted until the Harrison Act of 1914--and the drugs were readily available.

COMMENTARIES (Cont'd)

> "There still remain many gaps in knowledge concerning addiction during and following the Civil War. There is also need to investigate other major wars which either preceded or followed the Civil War to determine the role of drug addiction during these periods."

The development of the "dope fiend" mythology -- Kramer, From demon to ally--how mythology has, and may yet, alter national drug policy, J. Drug Issues (1976), p. 390.

> "Through recorded history those who were addicted to opiates were considered, at worst, unfortunate victims of a minor vice; they were much less likely to engage in criminal acts or raucous behavior than were alcoholics. However, at the turn of the last century concern over the high rate of addiction in the United States persuaded some individuals that federal laws were necessary if opiate dependence was to be controlled. Because opiate use, particularly opium smoking, had become a popular practice among the demimonde, many of whom found their way into jails for reasons unrelated to their drug use, an erroneous view emerged, that it was the opiate that caused the criminality. This perception was by no means pervasive and was rejected by many authorities. Nevertheless, well meaning individuals who needed ammunition for their argument that a federal narcotic law was necessary developed a campaign of propaganda in which the supposedly dire consequences of addiction were so vastly exaggerated that a mythology was developed which, in effect, demonized opiates, addicts and even doctors. So successful was their campaign, that not only was a rigid law passed, but the demonic perception of addiction came to be accepted as reality, particularly because the new law itself criminalized addiction."

The Hague Convention and the Harrison Act -- Zentner, Prominent features of opiate use in America during the twentieth century, J. Drug Issues (1975), pp. 99-100.

> "In 1912 a three-year series of international conferences on the world drug problem culminated in the signing of the Hague Opium Convention which was intended to control various aspects of the drug trade. The Hague Treaty did not go into legal effect until after World War I, when ratification of the Treaty of Versailles included ratification of the Hague Convention. The United States, however, had ratified the Hague Treaty in December of 1913 and immediately claimed it to be in force from that date. A principal reason why the United States did so argue was because the constitutionality of the newly-proposed Harrison Narcotics Act had been challenged in Congress on the grounds that its appearance as a revenue measure was a subterfuge to permit federal control in an area that had traditionally been reserved to the states. It was hoped that if the Act were presented as a fulfillment of an international treaty obligation the opposition in Congress would be muffled.
>
> "Congress could find nothing in the U.S. Constitution which gave it the power to prohibit the use of drugs. The Harrison Act avoided this problem by imposing a commodity tax of one cent per ounce on all opium-related drugs that were produced, imported, or sold in the United States....The Harrison Narcotics Law sought to eliminate the non-medical use of opiate drugs by establishing a system of taxing all drugs which were legally defined as addicting that were produced in or imported into the United States. The Law also sought to control indiscriminate over-the-counter sales and to control the indiscriminately-prescribing physician."

The Hague Convention and the Harrison Act -- Kramer, Controlling narcotics in America (1) Drug Forum (1971), p. 65.

> "The Harrison Narcotic Act had been three years in preparation. It had passed by Congress, and President Wilson signed it on December 17, 1914. It was presented then by Presidential proclamation, as it is presented now, as a law passed to fulfill our treaty obligations. Strictly speaking, the Protocol of the Third Conference, abrogating the necessity for unanimity, had no force since it was not approved by all those nations who had voted the requirement for unanimity. In fact, the Hague Convention did not come into force until after World War I when the ratification of the Versailles Treaty and other treaties of peace included ratification of the Hague Convention of 1912. Why then was it so vital that the United States, virtually unilaterally, claim that this multilateral treaty was in force?

COMMENTARIES (Cont'd)

> "The Constitutionality of the proposed Harrison Act had been challenged (and was to be challenged again in the Supreme Court) on the basis that its presentation as a revenue measure was a subterfuge to allow federal control in an area reserved to the states by the Constitution. Presenting it as a fulfillment of a treaty obligation would help such opposition.
>
> "Though it is usually stated that the Harrison Act was passed to fulfill our international obligations under the Hague Convention, it might be more accurate to state that the Hague Conference was organized so that the Harrison Act could be passed."

The differences between the Pure Food and Drug Act and the Harrison Act -- Brecher et al., Licit and Illicit Drugs (1972), p. 47-49.

> "The 1906 act required that medicines containing opiates and certain other drugs must say so on their labels. Later amendments to the act also required that the quantity of each drug be truly stated on the label, and that the drugs meet official standards of identity and purity. Thus, for the time, the act actually served to safeguard addicts.
>
> "The efforts leading to the 1906 act, the act itself and subsequent amendments, and educational campaigns urging families not to use patent medicines containing opiates, no doubt helped curb the making of new addicts. Indeed, there is evidence of a modest decline in opiate addiction from the peak of the 1890's until 1914.
>
> "For those already addicted, however, the protection afforded by the 1906 act and by the subsequent amendments was short-lived, for in 1914 Congress passed the Harrison Narcotic Act, which cut off altogether the supply of legal opiates to addicts. As a result, the door was opened wide to adulterated, contaminated, and misbranded black-market narcotics of all kinds...." (p. 47).

> "Far from appearing to be a prohibition law, the Harrison Narcotic Act on its face was merely a law for the orderly marketing of opium, morphine, heroin, and other drugs--in small quantities over the counter, and in larger quantities on a physician's prescription. Indeed, the right of a physician to prescribe was spelled out in apparently unambiguous terms...It is unlikely that a single legislator realized in 1914 that the law Congress was passing would later be deemed a prohibition law.
>
> "The provision protecting physicians, however, contained a joker--hidden in the phrase, 'in the course of his professional practice only.' After the passage of the law, this clause was interpreted by law-enforcement officers to mean that a doctor could not prescribe opiates to an addict to maintain his addiction" (p. 49).

The Harrison Act: a police measure -- Becker, Outsiders (1963), p. 137.

> "In formulating these laws [Volstead and Harrison], care was taken not to interfere with what were regarded as the legitimate interests of other groups in the society. The Harrison Act, for instance, was so drawn as to allow medical personnel to continue using morphine and other opium derivatives for the relief of pain and such other medical purposes as seemed to them appropriate. Furthermore, the law was carefully drawn in order to avoid running afoul of the constitutional provision reserving police powers to the several states. In line with this restriction, the Act was presented as a revenue measure, taxing unlicensed purveyors of opiate drugs at an exorbitant rate while permitting licensed purveyors (primarily physicians, dentists, veterinarians, and pharmacists) to pay a nominal tax. Though it was justified constitutionally as a revenue measure, the Harrison Act was in fact a police measure and was so interpreted by those to whom its enforcement was entrusted."

The Harrison Act: A mild regulatory measure -- King, Drug Hang-up (1972), pp. 21-22.

> "Because America had been so strongly committed to the purposes of the 1912 effort (the Hague Convention), and because....the United States was beginning to lose its perspective on the home front, Congress in 1914 enacted the Harrison Narcotic Act, which stood as the basic federal drug law for the next fifty-six years. The Harrison Act was

COMMENTARIES (Cont'd)

not in any sense a prohibition statute, but rather a mild regulatory measure consisting of registration and record-keeping requirements to which a moderate federal tax was added in 1919. Its avowed purpose was to bring the domestic drug traffic (including cocaine) into observable channels. As one of its chief supporters, Dr. Hamilton Wright, who had been a member of the Hague delegation, explained:

> 'It is designed to place the entire interstate traffic in the habit-forming drugs under the administration of the Treasury Department. It is the opinion of the American Opium Commission that it would bring this whole traffic and the use of these drugs into the light of day and thereby create a public opinion against the use of them that would be more important, perhaps, than the Act itself' (p. 21).

"Note that the Harrison Act imposed no standards as to quality, labeling, or packaging comparable to those prescribed in the federal Food and Drug Act of a few years earlier. And note further that it imposed no restriction of any kind on who might register and deal in the drugs, so long as the records were kept and the taxes paid. It required a far stretch indeed to make of this bland federal revenue law the fearsome instrument of repression it was soon to become. But stretch there was" (p. 22).

Two kinds of addicts -- Saper, Making of policy through myth, fantasy and historical accident, Brit. J. Add. (1974), pp. 184-185.

"That addiction level [19th century] was some 10 to 20 times the current level of addiction. Yet there was no 'addict problem' in the turn of the century America. Except for an eccentric few, people today do not condemn those around them for smoking cigarettes even though they would probably agree that it might be better if people did not smoke. We tend to be a bit less tolerant of those who chew tobacco though many still do, particularly in those occupations where it is dangerous to smoke, i.e. oil refineries, etc. We tend to think of chewing tobacco as a 'dirty habit' and slightly condemn those that do chew. Well, addiction to narcotics was thought of somewhere between the two examples. It was viewed as probably not really desirable--like not using deodorant in today's world. Slight disapproval but no condemnation. The only real concern was with the patent medicines themselves; they did not label their ingredients and made extravagant and unfounded claims. People would be deceived by the advertisements and claims and not seek the medical care they needed. Thus the Pure Food and Drug Act emerged as part and parcel of the Progressive Era.

"That the far vaster extent of opiate addiction then did not carry the moral, legal, social, or cultural stigma that far less opiate use does today is not difficult to understand. Opiate addicts were then predominately of the middle and upper socio-economic class with more female than male addicts. One 1889 study of Massachusetts' pharmacies showed that sales of opium derivatives were largely to those of upper income levels. Moreover some now very often ignored truths about opiates were clearly known then: addicts could not be detected as long as they were assured of a steady supply of their drugs. Opiate addicts do not suffer from the use of the drug, rather they suffer from its absence through withdrawal symptoms. Pillars of the community and middle class morality could be and were addicts. Some were known as addicts and some not. Where they were known as addicts those persons remained as pillars of the community--only as pillars afflicted with a physiological problem, i.e. like chronic gout.

"The entrance of the 1906 Pure Food and Drug Law into this rather sanguine picture only meant that addicts would be protected from unscrupulous pharmaceutical manufacturers and could be assured a supply of pure drugs through regulated channels. But there was another pattern of use regarding smoking opium, crude opium processed for smoking rather than for liquid opium or into morphine.

"The pattern of use of smoking opium that was so distinct from the use of other opiate drugs can be stated in one word--Chinese. Large numbers of Chinese came to the west coast of the U.S. in the 1850's to work as laborers in this country's rapidly expanding railroad network. The Chinese brought with them the habit of smoking opium which proved to be a very valuable means of relaxation and intoxication for those engaged in hard physical labor in a hostile alien environment thousands of miles from their home villages [see persp. 31].

COMMENTARIES (Cont'd)

> "Two distinct patterns of opiate usage therefore existed in the U.S.; the smoking of opium in the West, largely by Chinese, and the drinking and injecting of opium and derivatives in the rest of the country, largely by middle and upper classes, white Anglo-Saxon protestants (mostly female) and some Irish. One pattern was viewed as acceptable because the 'good people' did it. The other pattern was viewed as a growing menace."

Two kinds of addicts -- Kramer, Controlling narcotics in America, (1) Drug Forum (1971), p. 58.

> "During the last quarter of the nineteenth century, addicts could be placed into two groups: one, generally law abiding, introduced to their drug through a physician or through self-medication for a wide variety of physical complaints, and using the drug orally or by injection; the second, criminals, prostitutes or, at least, people flirting with unrespectability and taking the drug by smoking. Distinctions probably became vague after a few years, particularly when the second group adopted other techniques of consumption. During these years addiction to the opium drugs gradually became more and more identified with criminality and this obscured the fact that the majority of addicts were not criminals.
>
> "The movement to prohibit the use of alcohol also contributed, to some extent, to the increased use of opium. During the nineteenth century, even before national prohibition, local prohibition laws, and the stigma of drinking even where legal, was such that some people turned to opium....
>
> "Still another factor influencing the acquisition and continuance of dependence on opiates was the uncontrolled distribution of patent medicines containing substantial proportions of these drugs. The number of people whose dependence was initiated and sustained through these remedies, again, is impossible to estimate but must have been substantial.
>
> "Thus after the middle of the nineteenth century several events occurred which changed the picture of opium dependence in the United States. First, there was an increase in the rate of dependence, though it probably was not as great as is sometimes depicted; second, there was increasing awareness of the dependency producing qualities of opium drugs; and third, opium addiction started to become identified with criminals in the public's mind."

19th century opiate use and the Harrison Act -- Kramer, Controlling narcotics in America (2), Drug Forum (1972), pp. 154-155.

> "The distribution of medicinal opiates in the United States had been virtually uncontrolled. for a variety of reasons, not the least of which was the active merchandising of opiate and cocaine bearing patent medicines, a large number of Americans had become habitual users of these drugs. Other western nations, too, had substantial numbers of addicts, but it appeared that there were more in the United States. Physicians and pharmacists in general had become more careful in their dispensing of these drugs and there is some evidence that the addiction rate had begun to decline. Still, some form of control seemed mandatory. Some state laws had been passed, but they were relatively ineffective. Federal statutes seemed to be the only answer but direct federal control laws would be unconstitutional. Quite openly, without secrecy or bashfulness, an act was framed by Congress as a revenue and licensing measure whose real purpose was control of the manufacture and distribution of opiates and cocaine. As we have noted before, the act was further justified as a fulfillment of a treaty obligation.
>
> "Despite the real intent of Congress to control rather than to tax, and despite the questionable status of the 1912 treaty when the Harrison Act was passed, it was ultimately declared constitutional. There is no question but that effective controls of the distribution of opiates and cocaine were necessary. Aside from its questionable constitutionality, the Harrison Narcotics Act, though imperfect, was, on its face, a reasonable piece of legislation. Now that the tool was in hand, it seemed merely a matter of time before the addiction problem would be solved.
>
> "But from the beginning of the controls, and even before the beginning, before the passage of the act, there was one overriding question, a question which remains to this day the source of acrimonious debate: Should people, already addicted, who have developed a compulsive need for opiates, continue to receive their drug even under careful supervision?

COMMENTARIES (Cont'd)

> "It had been common practice for physicians to continue patients on opiates who were unable (or unwilling) to live without them. Most addicts had maintained themselves on regular doses purchased quite legally from pharmacists, and as far as could be determined then or can be determined now in retrospect, they continued to function well enough so that friends and even family members were often unaware of the existence of the addiction."

Origins and the changing attitudes toward drugs -- Grinspoon and Bakala, Cocaine (1976), pp. 252-253.

> "The psychoactive drugs, like most strong medicine, could also be powerfully poisonous. This had been recognized for a long time. What was new in the late nineteenth century, and fundamental to the campaign against proprietary medicines, was an increasing inability to tolerate this ambiguity, a demand for conceptual (and legal) restrictions, distinctions, and compartmentalizations. Even in 1915 the consciousness that opium, the indispensable medicine, and opium, the horrible poison, creator of dope fiends, were the same substance was beginning to disappear. Today relatively few people outside the health professions know that the feared and hated opium derivatives morphine and heroin are still the most effective treatment for severe pain available to physicians....The isolation of the opium alkaloids and the invention of the hypodermic syringe greatly increased both the powers and the dangers of the drug and enormously magnified the problem of addiction. But it was not merely technological change and the recognition of a genuine disease problem that caused this transformation of attitudes. Nor was racial prejudice against the Chinese decisive, any more than racial prejudice against blacks was the main reason for the decline of cocaine. There was a new hostility to all psychoactive drugs, including alcohol, because of their indeterminate and apparently uncontrollable powers--powers more reliable than those of the quack nostrums but no less mysterious and potentially monstrous."

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31

Opium Smoking
United States
1850-1914

BACKGROUND

The legal prohibition of drugs for nonmedical purposes appears to have occurred in the U.S. in times of social crises between society and various groups with different drug-use preferences, particularly minority and marginal groups, and groups already perceived as a criminal class (3:245; 8:29). Fear of drug use increases and it comes to symbolize the difference between the group and the rest of society; efforts are then directed toward eliminating either the drug or the group itself in order to restore social harmony and preserve the old order. This is illustrated by the reaction to opium smoking as well as to cocaine and marihuana use (see persp. 33 and 34).

Throughout the 19th century, opium was primarily used in liquid form among white, middle-class Americans. Most "opium eaters" were actually opium drinkers, the most popular mixture being laudanum (opium and alcohol). The introduction of morphine and the hypodermic needle by the late 19th century added to the concerns over opiate use, but such use was still not considered menacing. There was no association of opiate use with criminality. This tolerance was not exhibited toward the phenomenon of opium smoking, which was brought to the U.S. by Chinese laborers after the mid-century. The concerns that developed over opium smoking by the Chinese, the criminal underworld, and the lower classes beginning in the 1870's played a prominent role in encouraging the passage of strict federal antinarcotic legislation.

From 1860 onwards, opium smoking began a slow but steady rise, whereas the per capita importation of crude opium gradually began to decline after 1896 as consumption dropped in the face of agitation for strict controls (3:3). Starting in the West in the mid-1870's, local and state regulations against this use were passed and after 1909 the importation of opium prepared for smoking was prohibited. These early opium-smoking prohibitions made up the first nonalcohol drug legislation in the U.S. against the consumer for his indulgence; there is little doubt that this legislation had as much to do with the drug users as with the drug itself (8:14). The root of the attack was the "symbolic association" of opium smoking with criminals and with the Chinese, who were actively persecuted, especially in the West during the depression of the late 1870's (3:3).

CHRONOLOGY

1850-60's	INTRODUCTION	Tens of thousands of Chinese laborers immigrate to the U.S. in a period of labor shortage, bringing the habit of opium smoking with them (3:3).
1865+	USE SPREADS	Smoking spreads from the Chinese to whites, principally gamblers, prostitutes, and criminals (1:73).
1868	CALIFORNIA OPIUM DENS	Chinese-patronized opium dens are operating in California, but there is no public record of concern. In fact, labor contractors offer an allowance of half a pound of opium per month as a bonus to attract Chinese laborers (2:4).
1873	ANTI-CHINESE SENTIMENT GROWS	A sharp economic decline begins in urban industrial centers, which worsens in 1876. San Francisco is one of the hardest-hit areas. Unemployment rises, and small manufacturers and white laborers align themselves and unfairly identify cheap Chinese competition as the cause of their problems. Exclusion of the Chinese becomes a rallying cry of the working classes; the use of opium is one of the many issues which fuel the conflict. For the first time, official notice is taken of the opium dens

CHRONOLOGY (Cont'd)

		although even now they are not attacked as harmful per se (2:4-6).
1875	DRUG CONCERN GROWS	Concern increases in San Francisco over the spread of opium smoking among respectable whites; it is reported during the latter part of the year that authorities are cognizant of "many women and young girls and also young men of respectable family...being induced to visit the dens, where they were ruined morally and otherwise."
1877	WESTERN PROHIBITIONS	Nevada prohibits retail sales of smoking opium; 20 states follow, enacting statutes to eradicate the alien practice either by prohibiting operations of dens or the smoking and possession of opium. Most of these states are in the West where there is little pretense of trying to assimilate the newly immigrant Chinese.
1878	SAN FRANCISCO ORDINANCE	The first opium ordinance is passed in San Francisco making it a misdemeanor to "keep, or maintain, or visit, or in any way contribute to the support of any place, house, or room, where opium is smoked." However, the actual importing and selling of the drug are not defined as criminal acts (5:64). [According to Mark (1975), the first San Francisco ordinance, from which he quotes, appeared in 1878; other sources give the date as 1875. The earlier date apparently is derived from H.H. Kane (Terry & Pellens, 1928:73), who wrote in 1882 that in 1875 authorities became cognizant of the problem and passed a city ordinance "forbidding the practice under penalty of heavy fine or imprisonment or both."]
1878-80	IMPORTS AND USE INCREASE	The vice becomes indulged in much less openly, but nonetheless extensively; although the larger smoking-houses are closed, small dens are still well patronized and the vice is growing "surely and steadily" (1:73). A significant increase occurs in opium importation and smoking among the Chinese, although the population is declining. During a period of depression and unemployment, opium becomes an alternative source of income and a money token itself within Chinatown (2:6-7).
1881	ANTI-OPIUM LAWS	The San Francisco Chronicle states that the habit among whites has been confined mostly to hoodlums and prostitutes; however, now that there are scores of places where the habit can be contracted in clean rooms in respectable portions of the city, "the practice will gradually extend up the social grade" (9: 215). San Francisco authorities begin to recognize that the 1878 ordinance did little to deter and control whites from smoking opium. The California legislature passes a state anti-opium law; other states soon follow suit (5:62).
1883	TARIFF INCREASE	Congress raises the tariff on opium prepared for smoking.
1886	PROHIBITIONS QUESTIONED	An Oregon appellate judiciary states the following on the constitutionality of an opium prohibition: "Smoking opium is not our vice, and therefore, it may be that this legislation proceeds more from a desire to vex and annoy the 'Heathen Chinese' in this respect, than to protect the people from the evil habit" (8:14).
1887	IMPORT LAW	Importation of opium by Chinese (but not by Americans) is forbidden.

CHRONOLOGY (Cont'd)

1888	SMUGGLING	On January 12, the Secretary of the Treasury reports that the effect of opium-smoking laws had been to stimulate smuggling by organized gangs, concluding, "Although all possible efforts have been made by the Department to suppress the traffic, it is found practically impossible to do so" (7:44).
1889		San Francisco increases the fine for visiting an opium den from $110 to $250-$1,000, at the same time it licenses the sale of opium (5:62).
1890	TARIFF INCREASED	The tariff on smoking opium is increased from $10 to $12 a pound; the manufacture of smoking opium is limited to American citizens (7:44).
1897	TARIFF DECREASED	The tariff on smoking opium is reduced to $6 a pound in order to discourage surreptitious manufacturing and serious smuggling operations; thereafter, the tariff continues to increase (1:747-8).
c. 1900	OPIUM AND CRIME LINKED	Addiction becomes increasingly identified with underworld white slavery and organized crime, especially Chinese tongs (10:110).
1902		The Committee on the Acquirement of the Drug Habit of the American Pharmaceutical Association declares that "If the Chinaman cannot get along without his 'dope,' we can get along without him" (5:17).
1909	SMOKING OPIUM IMPORTS BANNED	The Smoking Opium Exclusion bans the importation of opium prepared for smoking. Around this time, Samuel Gompers, president of the American Federation of Labor and "the most articulate champion of the anti-Oriental cause in America (12:51), adds the threat of opium to his war against the Chinese coolie. Gompers writes the following description of what happens to white boys and girls in the Chinese laundry rooms: "What other crimes were committed in those dark fetid places when these little innocent victims of the Chinamen's viles were under the influence of the drug, are almost too horrible to imagine...There are hundreds, aye, thousands, of our American girls and boys who have acquired this deathly habit and are doomed, hopelessly doomed, beyond the shadow of redemption" (12:520, 6:78-9).
1914	HARRISON ACT	By 1914, 27 state and city laws against smoking are in effect; importation continues to increase (7:45). An additional federal statute imposes a prohibitive tax of $400/lb. on opium prepared in the U.S., and, in December, the Harrison Act increases penalties even further.

COMMENTARIES

Depression, unemployment, and Chinese opium smoking -- Helmer and Vietorisz, Drug Use, the Labor Market and Class Conflict (1974), pp. 6-7.

> "The explanation of Chinese drug use has typically been oriented to demand factors. That the demand existed in the mid-1870's and increased thereafter cannot be doubted, but the data suggest that an increase on the supply side preceded the rise in demand for consumption, that it was unrelated to population changes, and that the whole process may be explained differently....Briefly what was involved was a complex system of speculation in the international opium trade and the development of opium-trading organizations (tongs) within the

COMMENTARIES (Cont'd)

highly stratified and oligopolistic structure of the Chinese community in San Francisco. During the depression and wage slump, opium was both an alternative source of income and a money token itself within Chinatown.

"This is necessarily beside the point, however, for these developments followed the start of the exclusion campaign and the initial legislation against the drug. The latter were primarily responses to labor market failure, and the extent to which the secondary labor market, dominated by Chinese, offered no "work relief" to the unemployed or insecure white working class. The ideological role of the anti-opium campaign was to get rid of the Chinese, and it had a practical consequence: it provided a legal basis for unrestrained, and in the circumstances quite arbitrary, police raids and searches of Chinese premises in San Francisco. Ostensibly to identify opium dens, these raids served the same purpose that the vigilantes of the mine fields had performed against Chinese encampments in the mid-1850's."

The San Francisco Ordinances -- Mark, Racial, economic, and political factors in the development of America's first drug laws, Issues in Criminology (1975), pp. 61-62.

"In this rather vague piece of legislation [the 1878 ordinance], the visitor and the keeper or the operator of an opium den were defined as committing a misdemeanor. Significantly, the seller or supplier and the importer, who were usually wealthy San Francisco merchants of both European and Chinese ancestry, did not fall under any criminally defined act. As a result, this ordinance never attempted to stop the importation and the use of opium but merely served to harass and intimidate the opium den operators and their clients who were usually Chinese....

"Shortly after passage of the 1878 opium law, the city's policy makers through the courts and the Board of Supervisors began to reassess their former position and study possible alternatives or changes of the law. On the one hand the ordinance contributed to the general harassment of the Chinese and projected the image of criminality, but by the 1880's the city's fathers knew that their previous ordinance did little to deter and control whites from smoking opium and that the practice was increasing. The San Francisco Chronicle reported in 1886 that there were as many as 3000 to 4000 white opium addicts between the ages from 16 to 60 (Feb. 1, 1886). Also the arrest rates for keepers and visitors to opium dens were increasing. For 1885 the arrests for keepers was 38 and for the visitors, 220, compared to the previous year totals of 26 and 148 respectively.

"In March 1882, a resolution was presented to legalize opium smoking only in licensed dens....

"In 1889, San Francisco passed yet another opium ordinance increasing the then $10 fine for a visitor to an opium den to $250-1000 or a county jail term of 3-6 months or both (Dillon, 1962:30). It is evident that the history of opium legislation in San Francisco was not consistent. Initial policy penalized the selling of opium and keeping of opium dens. This stand was easily compromised when it was found that taxing opium could provide futher revenue for the city. Masters exemplifies this point by stating, 'Perhaps some lawyer can be found to harmonize these conflicting ordinances and tell us how the city can enforce the 1889 law, and yet license the sale of opium'" (1892:644).

The spread of opium smoking and the effects of legislation -- Terry and Pellens, Opium Problem (1928), pp. 73-74.

"Kane and other writers have described the rapidity with which the practice spread from San Francisco eastward involving practically every town and city in the country in its progress from the West to the East coast. The numbers of individuals who used opium in this form during the height of its popularity and before active law enforcement measures and other factors succeeded in controlling it to a large extent is not known. Various estimates have been made but obviously in a practice of this kind which was always frowned upon by the general public, as well as by official circles, no accurate figures could be obtained. From the amounts imported, presumably large numbers were involved. For the past ten or fifteen years, however, the smoking of opium has ceased to be a problem of any magnitude in the United States, though it is not a wholly extinct practice. It, however, must not be overlooked, in considering the development of the opium problem as we know it, that in many individuals still living the use of opium in other forms is the result of earlier

COMMENTARIES (Cont'd)

experience with smoking opium. The equipment required, the odor of the burning drug and later its cost all combined to make relatively easy the closing of the places where the drug was used in this form, once public opinion and police activities were awakened.

"The only measures employed for the control of importation of smoking opium before the passage of the Harrison Narcotic Act were those involved in the imposing of more or less heavy import duties, and...the importation figures varied from time to time as the import tax was raised or lowered. Concurrently, however, with the lessening of imports, due to heavy taxes, as Hamilton Wright states, smuggling operations increased and while the legal importation ceased entirely, as has been stated, in 1909, smuggling of this form of opium continued and to some extent exists today. It is not inconceivable that taxation and police and other activities had less to do with the ultimate near-control of the practice of smoking opium in the United States than had the popularizing in the underworld of the hypodermic and the sniffing of heroin, forms of indulgence that were cheaper, more convenient, more adaptable to many surroundings, and far more easily concealed from friends, public and authorities."

Early policy decisions and the first laws against opiates -- Saper, Making of policy through myth, fantasy, and historical accident, Brit. J. Add. (1974), pp. 185-186.

"Newspapers of the period 1875-1900--particularly but not exclusively in the West--carried lurid tales of crime and debauchery in opium smoking dens. All of these reports carried with them the sense of a singular and sinister Oriental menace. Anti-Chinese feelings became translated into an anti-opium smoking hysteria. The aggressive, debauched, and sexually aggressive image of the opium smoker took hold.

"The anti-Chinese character of the public's arousal is clear if from no other fact than that the image of the opiate smoker (Chinese) was never transferred to the opiate drinker and opiate injector (white middle and upper class). Concurrently with this anti-opium smoking hysteria was reasoned concern by some physicians over the public's and most of the medical profession's ignorance of the properties of the opiates per se. They did not cure illness but masked them by relieving pain and discomfort, thus inhibiting the thrust of the late 19th century toward curative rather than merely analgesic therapy. These 'concerned physicians' wanted some regulations governing the distribution of all opiates.

"What took place was the first of many strange marriages between a reasoned policy (whether correct or incorrect) and policy based upon myth, prejudice, and hysteria. Between 1887 and 1908 many states passed laws aimed at some aspect or other of narcotic distribution. Opium smoking was the prime target of course, particularly the earliest laws. Later laws also tended to include some regulatory scheme for the distribution of medicinally used opiates as well. Those regulations varied widely from state to state. The built-in confusion added pressure for the passage of a uniform national regulatory law--of an unspecified nature but at least uniform. In 1909 a Federal anti-opium smoking law was passed. But there was still no Federal regulations for other opiates."

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32

Opiates

United States

1914-1930

BACKGROUND

As the previous two perspectives illustrate, the early antinarcotics legislation was essentially directed toward two distinct problems--the overmanufacturing and overprescription of opium-bearing medicines and their use by middle-class whites; and the "street" or recreational use of smoking opium, principally among Chinese, marginal, and criminal populations. Whereas there was little moral stigma attached to the former and concerns were directed at preventing habituation by unsuspecting medical users, the latter was viewed as a vice and a threat to both public safety and health which had to be irradicated. There was thus a clear ambiguity in attitudes toward opium at the turn of the century. This ambiguity was ended in the years following the enactment of the Harrison Act by the enforcement of a highly restrictive policy which viewed all opiate and narcotic use as criminal. Whereas the possession of alcohol for personal use was never made illegal, even during national Prohibition, criminal sanctions were effectively extended against users of all "narcotics"--which came to include in the laws and the public mind not only the opiates but cocaine and later marihuana. The view grew that whereas alcohol could be used safely and in moderation, "narcotic" use inevitably resulted in dependence, insanity, death and a criminal, immoral lifestyle. Public opinion began more and more to abandon the 19th century view of opiate dependency as a misfortune or mishap and began to view "narcotic" use as a calamity which needed to be dealt with harshly.

Following the passage of the Harrison Act, there was still considerable confusion over its constitutionality, over what its impact would be, and how it would be enforced. In mid-January of 1915, the Treasury Department promulgated the regulations under which the act would be enforced, making it clear that the goal of federal enforcement was prohibition of narcotics for nonmedical addiction maintenance. At first, however, the Supreme Court upheld that any federal regulation of medical practice was unconstitutional (*U.S. v. Jin Fuey Moy,* 1916). But in March of 1919, in two landmark decisions, the Court upheld the Harrison Act's constitutionality and severely restricted the right of doctors to prescribe opiates. The primary focus of this perspective is how this regulatory tax measure was turned into a prohibition enactment; how the courts came to accept the strict interpretation of the Harrison Act; how the pattern of drug addiction began to change, and how the fear of the "demon flower" and its "dope fiend" users spread. The related rise and fall of America's controversial experimentation with a clinic system is also traced.

CHRONOLOGY

1915	ATTACK LAUNCHED	In March, the Treasury Department begins its legal attack on opium maintenance. In May, TD 2200 is promulgated, stating that physicians must show their good faith by decreasing the dosage or reducing the quantity prescribed from time to time. Doctors are attacked for the "selling" of prescriptions (1:123).
1916	*JIN FUEY MOY:* PRESCRIPTION RIGHTS UPHELD	In *U.S. v. Jin Fuey Moy,* the Supreme Court upholds the right of physicians to prescribe drugs to patients by a 7-2 majority. The government had attempted to stop Moy from supplying an addict with drugs in the course of his practice; the decision thus confirms the Justice Department's doubts about the legality of directly attacking the maintenance of addicts by physicians (1:128-32).

CHRONOLOGY (Cont'd)

1917	WORLD WAR I: HEROIN & CRIME LINKED	In April, the U.S. enters World War I, unleashing an atmosphere of political and social intolerance throughout the country. Rumors begin to spread about growing numbers of youthful heroin addicts. A national "crime wave" by youths becomes associated with heroin use. Heroin begins its rapid rise as a major public evil (2:181). The mythology of the "dope fiend" crystalizes (12; 17:36).
	CURES DOUBTED	By 1917, the possibility that there were no satisfactory cures for addiction was becoming clearer (21:604).
1918	RAINEY COMMITTEE	In March, the Rainey Committee is established by the Secretary of the Treasury to investigate the effect of the Harrison Act and rectify adverse court decisions so that the government can proceed with greater effectiveness against addiction maintenance. In August, Rainey introduces a bill into Congress to strengthen the Harrison Act (1:135-6).
	USER CHARACTERISTICS	G.D. Swaines discusses the two classes of addict which now exist: (1) physical, mental, and moral defectives, criminals, and tramps--the "dope fiends" whose addiction is a vice; (2) the "good people" addicted innocently, the curable victims whose addiction is not a vice (4:11).
	ARRESTS	Eight hundred and eighty-eight federal arrests and convictions for narcotics offenses are reported (5:143).
1919	HEROIN - CRIME CONCERN	The mayor of New York appoints a special Committee on Public Safety to investigate two related problems: (1) the heroin epidemic among the city's youth, and (2) bombings directed at institutions and national leaders (2:182). Rise in heroin use may be related to a rise in unemployment (20:13).
1919, Jan-Feb	PROHIBITION; HARRISON ACT STRENGTHENED	On January 16th, the 18th Amendment (Prohibition) is ratified by the necessary states. Prohibition is said to make crackdown on addicts more necessary, "lest the known millions of tipplers would sink even lower to become morphine or heroin or cocaine habitués." Thus Prohibition helps to unify the public in a condemnation of narcotic abuse and maintenance (1:157). A USPHS drug study of 1918-1919 also gives prominence to local liquor prohibition as a cause of drug addiction, speculating that increased sales of narcotics and patent medicines containing opiates occur where prohibition has long been in effect (19:55).
1919, March	PRESCRIPTION RIGHTS DENIED; *DOREMUS & WEBB*	In March, the Supreme Court severely restricts the rights of doctors to prescribe drugs to patients in *U.S. v. Doremus* and *Webb v. U.S.* In *Doremus*, the Court upholds the constitutionality of the Harrison Act, stating that the act "may not be declared unconstitutional because its effects may be to accomplish another purpose as well as the raising of revenue." The Court also affirms that doctors who maintain addicts violate the Act.
		In *Webb*, the Court establishes that the maintenance of an addict is illegal unless it is part of an attempt to cure the habit. Dr. Webb had indiscriminantly sold thousands of opiate prescriptions for 50¢ each. The Court held that prescription of morphine sufficient to keep the user comfortable

CHRONOLOGY (Cont'd)

		"by maintaining his customary use" is not a prescription "in the meaning of the [Harrison] law." Doctors who prescribe opiates to addicts are now confronted with the posssibility of fines and/or imprisonment.
1919, April	CLINIC SYSTEM BEGINS	As a result of the *Webb* and *Doremus* decisions, on April 9, six New York physicians are arrested for maintaining addicts on opiates, along with 200 addicts. In the belief that treatment was essential, the Internal Revenue Bureau supports the establishment of clinics for temporary maintenance and seeks the cooperation of the Public Health Service to take over federal responsibility for institutional treatment of addicts deprived of drugs (1:131). Opiate clinics to treat and "cure" addicts are opened in New York (on the day after the raid, April 10) and elsewhere, some with federal approval (6:3). All told, approximately 44 clinics are set up across the country. Poorly run from the beginning, the New York clinic immediately comes under attack.
1919, May	SHREVEPORT CLINIC OPENS	On May 3, Dr. Willis Butler opens the Shreveport Clinic at the request of Dr. Oscar Dowling, president of the Louisiana State Board of Health.
1919, June	RAINEY REPORT: USE INCREASES	The Rainey Committee report is released (however, it is dated in April and preliminary drafts had long been circulating). The report notes that the wrongful use of drugs has increased since the passage of the Harrison Act--that there are over 1,000,000 addicts in the country, that the illicit traffic is about to equal the medical traffic, and that dope peddlers are establishing a national organization. It is suggested that Prohibition would increase drug use and that following the March Supreme Court rulings, many addicts would be desperate for drugs. The committee therefore recommends federal and local governments enact legislation to provide for medical care, as addicts deprived of their drugs may become violent. Sterner laws and more state laws modeled on the Harrison Act are also recommended.
1920	HEROIN USE	The number of addicts decreases to about 100,000, compared to 250,000 in 1900. Heroin is growing in popularity, in part because of the new laws controlling opiate dispensing. Heroin is easily adulterated and thus can be made more readily available on the growing illicit market (7:85-6). The New York Clinic uses heroin because of its popularity to entice young addicts to the clinic (1:76).
1920, Jan.	TREASURY REORGANIZED; CLINICS ATTACKED	On January 1, a separate Narcotics Division is set up in the Treasury Department and Prohibition agents take over the control of narcotics enforcement from IRB agents; the Narcotics Unit launches a campaign to close the opiate clinics, claiming addicts are being sold their drugs. The 1920 Annual Report of the Commissioner of Internal Revenue declares that the so-called clinics were established for "mercenary purposes or for the sole purpose of providing applicants with whatever narcotic drugs they required for the satisfaction of their morbid appetites." The report concludes that "the cure of narcotic addiction is an impossibility unless accompanied by institutionalized treatment" and that steps are being taken to close the clinics (4:17).

CHRONOLOGY (Cont'd)

	NEW YORK CLINIC	The New York Clinic is vociferously attacked and used as a negative model to justify closing all clinics (6:7). Poorly conceived, the clinic has no effective procedures for dealing with the difficult problems of addiction in New York. There are no effective controls or checks to prevent users from supplementing their dosages, which are progressively diminished, and the illicit traffic in heroin is already considerably developed. Located in the slums of New York, addicts line up waiting for their turn, thus publicizing the clinic. Also, under these conditions, many employed and respectable addicts do not patronize the clinic (5:142).
1920, March	N.Y. CLINIC CLOSED	On March 6, the New York City clinic is closed. The first large-scale investigation of the Shreveport clinic by federal agents is conducted; no violations are found (1:67).
1920	AMA ATTACKS CLINICS	The American Medical Association passes a resolution opposing ambulatory clinics.
1920, May	SHREVEPORT CLINIC	By May 1920, after one year of operation, 450 patients have been treated at Shreveport, of whom 46 have been detoxified (6:8).
1920, Sept.	SHREVEPORT INVESTIGATED	The new antimaintenance policy of the Internal Revenue Bureau enforces a regimen of decreasing dosages (1:158). Dr. Dowling informs Dr. Butler that there is a movement to close down the clinics. The Shreveport Medical Society investigates the clinic and issues a report supporting and approving of both it and Dr. Butler (6:9-10).
1920, Nov-Dec	SHREVEPORT	After a visit from Col. Levi Nutt, head of the Treasury's Division, Dowling recommends all three Louisiana clinics should be closed. Prohibition Commissioner John Kramer then warns Dowling he can be indicted if the clinics are not closed (1:164-6).
1921	TREASURY REGULATIONS	The Treasury Department issues regulations outlining the treatment of addiction permitted under the Harrison Act, stating: "It is well established that the ordinary care of addiction yields to proper treatment, and that addicts will remain permanently cured when addiction is stopped." The pamphlet suggests that most of the addicts who attended the clinics could easily have been cured of their habits had it not been for the clinics (5:141).
1921, March-April	SHREVEPORT	In March, the Louisiana State Board of Health orders all three Louisiana clinics closed; the Shreveport clinic closes, but reopens the same day under another name with approval of local physicians and the city council (6:12). In April, the city council passes an ordinance making the program a city clinic.
1921, June	CLINICS CLOSE; ARRESTS INCREASE	The Prohibition Commissioner reports that all clinics but one are closed and that the results achieved from the closures are most gratifying (16:521; 5:140). Arrests and convictions for narcotics offenses rise to 4,014 and 1,503, respectively (5:143).

CHRONOLOGY (Cont'd)

1921, Oct.	SHREVEPORT INVESTIGATED	A second full-scale investigation of the Shreveport clinic is made by federal agents, who still find no violations of the law. Full cooperation still exists between Shreveport police, courts, clinic, and local citizens (1:168).
1922, Aug.	SHREVEPORT INVESTIGATED	A federal agent is sent to Shreveport to find damaging information on the clinic. In his report, he states that four citizens asked him to help shut off the illicit supplies of narcotics in their town; he also accuses Butler of making money from the clinic (1:169-70).
1922	BEHRMAN CASE	In *U.S. v. Behrman*, it is held that any wholesale prescription of opiates violates the law.
1923, Feb.	SHREVEPORT CLOSES	In January 1923, another federal agent is sent from Richmond, Virginia, to Shreveport to close the clinic; he meets with District Attorney Phillip Mecom and Federal Judge George Jack, who meet later with Butler. The decision is made to close the clinic (6:15). On February 10, under pressure, Butler closes the clinic, but the hospital detoxification program continues.
1924	HEROIN BAN	The manufacture and importation of heroin is prohibited in the U.S.
1925	LINDER CASE	In *Linder v. U.S.*, a physician is unanimously vindicated for prescribing to an addict 4 tablets of morphine and cocaine for relief of a condition incident to addiction. His action is considered neither improper nor unwise. Under this ruling a physician in good faith and according to fair medical standards could give a dependent person moderate amounts of opiates to relieve withdrawal symptons without violating the law. Nevertheless, federal narcotic agents increase their harassment of physicians who seek to treat addicts by warning them of possible imprisonment (10:101; 16:522).
		The New York City Commissioner of Corrections ascribes to opiates the high rate of murder and suicide in the city (2:183).
1926	BOYD CASE	In *Boyd v. U.S.*, the Supreme Court further distinguished between the legal prescription of opiates for treatment and the illegal prescription to indulge an acquired longing (16:522).
1928	HARRISON UPHELD	In *Nigro v. U.S.*, the Harrison Act is again upheld, 6 to 3.
		Richmond Hobson, Prohibition and antinarcotics crusader, declares: "Drug addiction is far more incurable than leprosy, far more tragic to its victims, and is spreading like a moral and physical scourge...Most of the daylight robberies, daring holdups, cruel murders and similar crimes of violence are now known to be committed chiefly by drug addicts, who constitute the primary cause of our alarming crime wave. Drug addiction is more communicable and less curable than leprosy" (1:191).

CHRONOLOGY (Cont'd)

1929	NARCOTIC HOSPITALS	On January 19, Congress authorizes the establishment of federal narcotics "farms," which later become the U.S.P.H.S. hospitals.
1930	FBN FORMED	The Federal Bureau of Narcotics is formed; many of its agents, including its first commissioner, Harry J. Anslinger, are former Prohibition agents.

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The American approach -- Zentner, Prominent features of opiate use in America, J. Drug Issues (1975), p. 101.

> "The program that was designed to attack the opiate problem in the United States following passage of the Harrison Act and subsequent Supreme Court decisions is, from a legal standpoint, unusual in that it was not established by legislative enactment. Rather, it resulted from actions of administrative officials who interpreted the Harrison Act in a manner which was congruent with their own philosophy regarding the treatment of drug dependency.
>
> "The regulations which were established by judicial decisions and administrative directive embody a specific approach to the problem of drug dependency. First, that approach reflects the belief that it is possible to stop the spread of drug dependency by prohibiting the drug itself. Deprivation of the drug is to be accomplished by eliminating the supply. Secondly, that approach reflects a belief that stiff penalties can act as a deterrent to drug use. Thirdly, by virtue of possessing or selling drugs, the drug user is to be viewed as a criminal. Medical considerations are of secondary importance. Fourthly, the American approach to opiate control exercises strict control over the physician in the practice of medicine. It makes the physician responsible for administration of opiates, while at the same time it sets down medical opinions of prognosis and dictates the kind of treatment to be given."

Social conditions and Supreme Court decisions -- Musto, American Disease (1974), pp. 132-4:

> "The change in judicial outlook between 1915 and 1919 with regard to addiction maintenance was not the triumph of a minority but the majority's success in making a minority view intolerable. What had been a respectable viewpoint by 1915, although not the dominant attitude of the public--the value of addict maintenance by physicians or others--by 1919 and 1920 had come to seem a great danger and folly. Advocacy of maintenance was repressed as sternly as socialism. Vigorous protests from a few physicians, congressmen, politicians, and laymen were completely ineffective in modifying legal opposition in supplying drugs for the pleasure or comfort of addicts.
>
> "Between the *Jin Fuey Moy* decision in 1916 and the vigorous attack on addiction in 1919, profound social changes had occurred in the United States. World War I had been fought, the 18th Amendment had been adopted, and the liberalizing movements of LaFollette, Theodore Roosevelt, and Wilson had declined into a fervent and intolerant nationalism. As a corollary perhaps to the last change came an enormous fear of Bolsheviks and anarchists, which has been termed the Red Scare of 1919-20.
>
> "The Harrison Act appeared to both Republican and Democratic administrations a sound measure to protect the nation from the ravages of addiction. Its form as a tax measure was a familiar ruse to attain a moral end by constitutional means.
>
> "Having already been defined by most Americans as immoral or at least the cause of wasted lives, addiction by 1918 was perceived as a threat to the national war effort. Anything so perceived was likely to be in trouble. Any action interpretable as support for the enemies of the United States was punished severely, and the nation adjusted itself to a high level of intolerance and suspicion. . .
>
> "This intensely fearful period in American history must be borne in mind in evaluating the suppression at the time of dissent on the issue of narcotic control. Since narcotic

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use was officially described as leading to antisocial acts and individual degeneracy, the current fear of such conditions helps explain the public's angry opposition to anyone advocating the maintenance of such an evil."

Heroin and crime -- Musto, Early History of Heroin (1974), pp. 182-183.

"There were allegedly two links between heroin and crime: addicts stole in order to purchase drug supplies, and heroin stimulated a user to violent crime as a result of its physiological effect. Although the second assumption is incorrect, it was widely believed and became a persuasive argument against addiction maintenance programs....

"Not only did the war unleash an atmosphere of intolerance for any deviance, but it also began what was termed a national 'crime wave' by youth: bank robberies, other armed holdups, senseless murders, and aggravated mischief. In this context heroin provided a convenient explanation for disorder: the 'crime wave' age group was similar to that noted as susceptible to heroin; the drug possessed fearful but vague effects; and an ascription of crime to its physiological stimulation was easily accepted, thus taking pressure off law enforcement in its efforts to curb violent crime. Heroin became a public enemy.

"The link was further forged by crime statistics gathered from jails, prisons, and arrest records. With the enforcement of anti-drug laws or ordinances, the number of drug-using individuals in the statistics increased. Two conclusions were drawn from these records in order to support the link with crime. First, many or most of those arrested on anti-drug charges also had criminal or arrest records for other crimes; second, the increasing number of inmates or arrestees with drug habits suggested that the overall drug problem was rapidly growing worse. The fact that the inmates were in jail because of law infractions of recently enacted and increasingly enforced drug laws was seldom stressed."

The Harrison Act and heroin -- Duster, Legislation of Morality (1970), pp. 23-24, 27.

"Those who argue that morality can not be legislated are inconsistent in their observation of the moral-legal issues in the three social problem areas of prostitution, drug addiction, and racial discrimination. One may challenge the comparability of these three problems with some justification. With racial prejudice and discrimination, for example, men already have strong feelings by definition, and the issue is whether law would achieve a change in the direction desired by the legislators. Prior to 1900, quite the opposite state of affairs existed as to drug use, in that men did not feel strongly about heroin consumption. The federal law of 1914 was therefore enacted prior to strong moral judgment about heroin use per se. However, it did have the effect of pushing heroin into an arena where strong moralistic feelings existed. (Heroin use came to be associated with the 'dregs of the cities' and sensual gratification; it came to be thought of in the same moralistic manner as the opium dens.) By the 1930's narcotics had joined prostitution and alcoholism as major moral problems in the minds of Americans.

"Those who take the position that morality can not be legislated usually favor laws that support the existing moral order, such as their support of laws against prostitution and heroin use. The law is thereby conceived to be a kind of dam that is constructed after moral judgments are developed. The dam acts to hold back the floodtides of a contrary morality (its source unaccounted for), and consequently is seen as necessary to preserve the existing moral order....

"The history of narcotics use in the United States...has illustrated how the law can shift neutral behavior into that which is strongly overladen with moral condemnation....The effect of present narcotics legislation, directed as it is to a moral area that is private and 'victimless,' can not be sufficient to alter the behavior of the drug user in the direction desired by the legislators."

The effects of the Harrison Act -- Waldorf, et al., Morphine Maintenance: The Shreveport Clinic, 1919-1923 (1976), p. 47.

"The history of the Shreveport clinic tells us a great deal about the nature and treatment of opiate addiction. The Shreveport staff found no particular innate psychological maladies in their addict-patients. Nor did they find any deleterious effects from maintaining

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addicts on large doses of morphine for long periods. These addicts were able to live, work, and lead quite normal and productive lives while being maintained. They were found to respond well to treatment when regarded as responsible human beings, rather than irresponsible, disturbed criminals as they often are today. Now, clearly, there have been some changes in the nature of opiate addiction and addicts. But historical evidence inevitably leads to the question, 'Were laws and policies changed to fit addicts, or did addicts change under the laws and policies?' From what we have learned in Shreveport, and from what Terry, Pellens, and Musto have discovered about the history of opiate addiction, we must conclude that the laws and policies are more the cause than the effect."

Effects of the Harrison Act: Creation of an addict subculture -- Zentner, Prominent features of opiate use in America, J. Drug Issues (1975), p. 103.

"Implementation of the Harrison Act by Treasury Department agents, relying upon their own interpretations of it, was responsible for converting opiate dependency from a misfortune into a national disaster. One consequence of the interpretation and implementation of that act was to discourage the medical profession from dealing with a legitimate medical problem. Another related consequence was to define the addict as a criminal and degenerate rather than as an afflicted person. In proceeding from early 1915, when opiates were freely available, to 1920, when it became illegal even for a physician to prescribe opiates, a large number of American citizens found themselves labeled by the public and by the government as criminals.

"One criticism that can be made of the law enforcement approach to the problem of opiate dependency concerns the creation of an addict subculture. Prior to passage of the Harrison Act no addict subculture of any consequence existed in the United States. Drug dependent persons did not display any special cohesion or loyalty as a group; they possessed no special knowledge concerning the acquisition and administration of drugs, no justification for using drugs, and they did not reject the non-addict world. However, during the decade of the 1920's these elements of an addict subculture began to emerge.

"An emerging subculture of drug dependency was stimulated by the changing character of the drug-dependent population in the United States following passage of the Harrison Act. After that Act went into effect the sex ratio among the addicted changed. Whereas a majority of pre-Harrison Act addicts were middle-class women, by 1918 it has been reported that drug addiction was about equally prevalent in both sexes. This ratio itself soon disappeared as middle-class white women continued to decline in numbers and were replaced by lower-class males. Moreover, the average age of the user declined following passage of the Harrison Act....

"Public anxiety over the drug menace during the period after the First World War was also aroused by the propaganda activities of the Narcotics Division of the U.S. Treasury Department. In 1923 the Department announced that there were one million addicts in the United States. These people were portrayed in Departmental literature as dope fiends and degenerates. During the period between the world wars the 'dope menace' became a national neurosis and the addict came to be regarded as a criminal degenerate who would stop at nothing to indulge his vice."

The Harrison Act and the cult of curability -- Musto, The American antinarcotic movement: Clinical research and public policy, Clinical Research (1971), pp. 601-605.

"It is instructive...to review the role of clinical research in the formation of... national policy since the cheerful optimism of clinicians with proffered 'cures' for addiction contributed to the prohibition-like laws....Other forces also pushed toward strict drug controls; for example, the State Department believed that international production and manufacture could be brought under close control. Nevertheless, it would be misleading to overlook the scientific research which raised false hopes that addiction was a controlable disease like diptheria....

"A more widespread awareness that some physicians were casually dispensing large amounts of narcotics combined with the continued belief in a specific cure to contribute to an increasing insistence that the Harrison Act be made a tighter rein over American physicians

COMMENTARIES (Cont'd)

and pharmacists. In March 1919, the first such strict interpretation was handed down by the Supreme Court. The maintenance of addiction was declared illegal medical practice, and a now familiar control style was instituted on a national scale.

"The clinical research which repeatedly reported effective addiction cures was a factor in this kind of prohibitive law. The early report by the American Commissioners in Shanghai reflected their belief that cures did exist and were quite practicable. If addiction was a disease, as some physicians and scientists argued, it was also simultaneously an eminently curable disease. If easy curability were an underlying assumption of reformers, then the strict prohibitive goal would appear more reasonable and accusations that proponents of such a control style knowingly drove addicts into inevitable misery could not be maintained, at least for the period before the curability claim was refuted.

"By 1918 and 1919, the cure of drug addiction was in grave doubt. This is not to say that new cures and successes were not still reported in the medical press, but those who followed addicts after 'treatment' were becoming quite discouraged about prospects of 'cures'....

"...[T]his brief survey suggests that the 'cult of curability' which urged prohibition-like measures after 1908 was supported by investigations reported in prestigious medical journals. The goal of strict enforcement is not so mysterious when one realizes that experts believed that the addict, even if afflicted by a recognized and specific medical disease, only had to undergo a three- or five-day treatment to rid himself of the curse.

"This side of the history of narcotic control in the United States perhaps makes more comprehensible the skeptical attitude of federal enforcement officials in the 1920s toward the 'medical approach'....

"...[I]t seems clear that the clinical investigators and the medical profession's leaders were in step with their times when they anticipated a definitive solution to the problem of addiction. The Harrison Act's passage in 1914 represented a victory for reformers within the health profession who were at that time considered realistic and progressive."

The clinic system -- Brill, Treatment of Drug Dependence (1973), p. 115.

"The restrictive court decisions [of 1919] resulted in an abrupt nation-wide withdrawal of prescribing physicians from what has been called by some the treatment of addicts, and has been branded by others as outright selling of scrip (Kramer, 1972). As a replacement for this service, and with the encouragement of the Treasury Department, some 44 public clinics were set up across the country, beginning in 1919, to supply addicts with their drug. Some of these clinics, especially those in New York City, were poorly operated, but it is claimed that some of the others such as the one at Shreveport, Louisiana, were successful (Terry and Pellens, 1970). The clinics were closed by governmental action with the support of the American Medical Association (Kramer, 1971) in 1924. Unfortunately, the effectiveness of these clinics was never evaluated even by approximation, and the data which remain are fragmentary and entirely impressionistic. All we know is that the official reaction of the time was strongly unfavorable."

The Shreveport clinic -- Musto, American Disease (1974), pp. 168-170.

The last clinic to close, the Shreveport Louisiana Clinic, was not a failure like the New York Clinic. Dr. Charles Terry, co-author of The Opium Problem (1928), sought a large number of statistics from the clinic's director, Dr. Willis P. Butler, and grew to admire the operation and success of Butler's clinic. Despite numerous investigations, federal agents could not find any violations of the statutes; instead, they found complete cooperation between the clinic, the police, city officials, and federal officials. Shreveport became an obvious irritant and threatened to cause a revival of clinics throughout the nation. The clinic's demise began in late August 1922, when an agent, H.H. Wouters, reported that citizens in the town asked his aid in stopping the illicit supplies of narcotics being sold in the town; a subsequent investigation report stated that Butler was making money off of the clinic. Finally in January of 1923, federal agent G.W. Cunningham was sent to Shreveport to close the clinic. After a meeting with the local District Attorney, Federal Judge, and Dr. Butler, it was decided to close the clinic on February 10, 1923.

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The clinic system -- Lindesmith, The Addict and the Law (1967), pp. 138-144.

According to a 1953 Bureau of Narcotics report, Narcotic Clinics in the United States, "the clinic system resulted in all sorts of evils and abuses including especially an increase of the illicit traffic and the spread of addiction" (p. 138). However, actually the clinics were opened upon recommendation of federal authorities and closed because they were ordered closed under threat of prosecution by the federal government. The reason for this change in attitude was a reorganization within the Treasury Department, whereby authority for the enforcement of the Harrison Narcotic Act was transferred from the internal revenue agents to Federal prohibition agents. "The brief period of existence of most of the clinics, the arbitrary manner in which many were closed...fit neatly with the theory that the new officials brought with them a new philosophy--that of prohibition as expressed in the Volstead Act" (p. 141).

The clinics were never intended as a means of curing addiction, but were from the beginning conceived as emergency devices to prevent the economic exploitation of addicts by drug peddlers. It was recognized that complete withdrawal of the drug needed to be undertaken within a hospital setting, but the clinics were set up hastily and often by persons who knew little or nothing about drug addiction. Although some clinics were not failures, it appears the federal government picked the New York City clinic as its example of a clinic (p. 145). A reason given by the federal government for closing the clinics was the increase in illicit traffic of drugs. However, traffic, which was negligible before 1915, had already developed to considerable proportions by 1919--before the opening of the clinics. The establishment of the clinics in which a grand total of less than 15,000 addicts ever registered did not contribute to the increase in traffic--rather the increase was due to the Supreme Court decisions, which caused medical men to refuse to treat addicts (p. 143).

The federal government relied heavily on the statements of two New York City health officials who were associated with the clinic--Dr. Royal S. Copeland, and Dr. S. Dana Hubbard. Both criticized the clinic and Hubbard called for stricter enforcement of the Harrison Act, saying, "If they [addicts] cannot obtain a supply, they will reform..." Both men also had positive things to say about the clinic, but the federal government ignored such statements (p.144).

Impact of the 1919 Treasury reorganization -- Saper, Making of policy through myth, fantasy, and historical accident, Brit. J. Add. (1974), pp. 188-189.

"[Following the Harrison Act] the Treasury Department was soon flooded with applications for 'registration permits' from narcotic addicts still hoping for some way not to be made criminals. But no such 'permits' were possible under the law. The expedient solution to this crisis turned out to be the establishment of narcotic dispensaries or clinics with the approval of the Federal Government. The plan was to provide treatment which would consist of gradual detoxification; ergo--cure. The first clinics opened in 1918. One year later in 1919 all but one of the 44 clinics actually opened were being forced to close by the Treasury Department. The situation of the addicts had certainly gotten no better nor had the 44 clinics nationwide been able to treat all of the addicts. Rather the closing represented the further development of policy through belief and ideology, and a particular moral stance. Late in 1919 the Treasury Department reorganized its enforcement staff. The field staff, who were formerly supervised by revenue collectors, came under the direction of prohibition agents. The revenue collectors who were trying to meet a crisis situation for addicts as humanely as possible were replaced by enforcers of the Volstead Prohibition Act who brought with them the attitudes and moral stance and self-righteous fervor of the anti-liquor forces.

"The clinics were all closed as rapidly as possible, the well run ones as well as the sloppy ones. The arbitrary closing of all of the clinics, the 'good' and the 'bad' ones. only makes sense if the dispensing of narcotics to addicts is *per se* condemned as morally reprehensible. This is just the attitude the prohibition agents brought to the problem. And again the change in policy direction was due to 'historical accident,' the chance concurrence of events. No one in the Treasury Department rationally considered the problem and concluded a 'harder' line against addicts. Rather the reorganization which combined the enforcement of the Harrison Act with the Volstead Act was viewed only as managerial efficiency. It so happened that the Prohibition Act approved in October 1919 provided for a

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larger force than already in existence for the Harrison Act. The smaller unit merged with the larger and adopted the attitudes and policies of the Prohibition unit. Again, 'historical accident.'

"To simply be an addict was now viewed as evil and forced the addict to become a criminal and associate with criminals in order to obtain a supply of drugs. The resulting criminal activities became self-fulfilling prophecies. Soon, laws were enacted making the *condition of being an addict* a crime--not just the stealing, purchasing, or possession of drugs was criminal but also the condition of being physically addicted to narcotics was made criminal.

"Through the period 1920-1950 the nation's fully developed policy which regarded addiction to narcotics *per se* as a heinous moral affront and criminal continued to mature. The formation of the separate Bureau of Narcotics in 1930 under Harry Anslinger bureaucratically both epitomized and institutionalized that national narcotic policy."

Comparison of the temperance and anti-opiate movements -- Zentner, Prominent features of opiate use in America, J. Drug Issue (1975), p. 102.

"Both the Harrison and Volstead Acts had their roots in a conflict between the puritan ethic and its relation to intoxicants. Three norms are closely associated with this set of values. One norm that was applied to justify curbs on alcohol and opiates was that of individual responsibility for one's actions. A corollary to this norm held in disrepute any practice that led to a loss of self-control....

"A second norm concerns the concept of 'undeserved pleasures.' The assumption here is that pleasure is legitimate only if it has been earned. This assumption has led to ambivalence about pleasurable experiences of any kind except those that result from actions which are considered proper in their own right. Those individuals who pursue pleasure for its own sake divorced from any higher pursuit are to be condemned for enjoying 'illicit pleasure.' Consequently, alcohol and the opiates were rejected because they resulted in a type of pleasure that the puritan ethic condemned.

"A self-righteous element was the third norm to play a role in the suppression of intoxicating substances. Repressive laws were viewed as being the only legitimate way to curtail the use of intoxicants for the betterment of both the individual and the society. The above three norms laid the moral foundation for both the Harrison and Volstead Acts....

"Notwithstanding the similarities, there are differences that existed between the temperance and opiate campaigns. For one thing, the temperance movement was a matter of vigorous public debate, while the anti-narcotics movement was not. Also, temperance legislation was the product of a highly organized national lobby, while opiate legislation was largely anticipatory of future problems. These divergent patterns reflect the separation that existed in the public and professional mind between alcohol and opiates. Use of alcohol was an indigenous American practice, while the use of opiates was not. Users of the latter drugs were considered to be either aliens or marginal members of society.

"Why did the drug crusade continue after the pro-alcohol forces had succeeded in defeating Prohibition? One reason was probably the small size of the addict population compared to the number of people who used alcohol, together with the political strength of the pro-alcohol forces. Also, drug dependency was not a familiar condition. Finally, drug dependency was more frightening because in the public mind it robbed people of moral choice and self-control."

The criminalization of possession and use -- Bonnie, Reaching out, in Bonnie and Sonnenreids, eds., Legal Aspects of Drug Dependence (1975), p. 46:

"During the last years of the 19th Century and the first 2 decades of the 20th Century, the nation's legislatures declared war on the use of 'habit-forming' drugs, including alcohol, and on the 'crime, pauperism and insanity' associated with addiction. The primary goal of this policy was uniformly shared--to root out *habitual use* of any intoxicating substance. In the context of the antinarcotics laws, this goal was inseparable from the comprehensive attempt to limit use of 'narcotic' substances to medical channels and, conversely, to eliminate all 'nonmedical' use. By contrast, no consensus supported the limitation of use of alcohol to medical channels; clear distinctions were drawn by opponents of Prohibition

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between intemperate or habitual use on the one hand, and 'moderate' use on the other.

"The fundamental point of this essay is that the coercive powers of the law were brought to bear on the implementation of *consensus* policies in every conceivable way. All institutional limitations on the uses of law to control personal behavior were brushed aside in the interest of ridding society of drug and alcohol habits; inebriate commitment laws, narcotic possession laws, and even anti-maintenance laws were the new devices. Yet in the one instance where the policy was *not* supported by a consensus of opinion (that consumption of alcohol for intoxicant purposes was objectionable in itself) the coercive powers of the law were not employed--possession for personal use was not a crime.

"Leaving alcohol aside for the moment, we should trace the logic of antinarcotics policy. The pharmaceutical companies and pharmacies were divested of their previously unrestricted license to distribute 'habit-forming' drugs; this was, of course, the fulcrum of the new policy--curtailing availability. The legal system imposed paper requirements and restrictions upon the conditions of distribution, applying customary legal devices for regulating the conditions of economic activity.

"The antinarcotics policy went substantially beyond this, however. As part of the fundamental preventive approach, the criminal law was extended to all consumption-related activities outside the medical system, the most important being possession. Doubts about the legitimacy of this intrusion of criminal law into the sphere of private conduct were easily overcome by the moral antipathy toward narcotics use, the assumption that use of these substances would inevitably escalate to addiction, the emerging social stereotype of nonmedical 'street' users and the assumption that total prohibition would indeed eliminate nonmedical demand. (That *each* of these factors was missing in the context of alcohol prohibition easily accounts for the failure to supplement prohibition of its manufacture and sale with prohibition of possession and use)."

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33

Cocaine
United States
1859-1930

BACKGROUND

The previous three perspectives dealt with attitudes toward opiate use; another important factor in the development of early antinarcotic legislation was concern over widespread use of cocaine--in patent medicines and beverages, and on the "street" by blacks, the lower classes, and criminals.

In the 16th century, the Spanish discovered the use of coca leaves by the Incas. Used for its euphoric effects, to increase energy and lessen fatigue, the Incas considered it "the divine plant" and the "greatest of all natural productions" (13:20). They made it the center of their religious and social systems, where its use was carefully controlled by ritual sanctions. Unlike tobacco, coca use did not become prominent in either America or Europe, probably because from the time of the Spanish conquest to well into the 19th century most of the coca exported into Europe arrived in such poor condition that it had virtually no effect. Thus it was widely circulated that the Peruvian Indians only imagined the effects accredited to coca (1:18).

Around the mid-19th century, two significant developments occurred with dramatically altered this situation. First, Angelo Mariani combined coca and wine to produce his phenomenally successful Vin Mariani. Second, cocaine, the chief alkaloid in coca, was isolated. By the late 19th century, cocaine had achieved considerable popularity in the U.S. as a general tonic and addiction cure; its exhilarating properties made it a favorite ingredient of medicine, soda pop, and wine. But as quickly as cocaine use spread, so did the reaction against its use. Cocaine became probably the single most feared drug in the country, particularly in the South where it was believed that euphoric and stimulating properties of cocaine might make black users disregard their position and attack society. As many have pointed out the original "dope fiends" of American folklore were black cocaine-using workers and prostitutes. Such fears played a significant role in the passage of the Harrison Act, in which cocaine was classified incorrectly with opium as a narcotic.

CHRONOLOGY

1859-60	COCAINE IDENTIFIED	Pablo Mantegazzo publishes an essay praising coca's ability to lessen fatigue, stimulate strength, elevate spirits, and support potency and sexual desire. Albert Neimann isolates the chief alkaloid of coca, names it cocaine, and notes its numbing effect on the tongue.
1863-65	VIN MARIANI	Angelo Mariani introduces Vin Mariani, which becomes an extremely popular preparation of coca and wine. Mariani is given a gold medal and cited as a benefactor of humanity by Pope Leo XIII, a frequent user (1:55; 2:180).
1873	MEDICAL USES	Alexander Bennett demonstrates the anesthetic properties of cocaine.
1884-1905	EARLY PRAISE; USE SPREADS	Sigmund Freud publishes Ueber Coca describing and praising the effects of cocaine, "a magical drug," on himself and others; he suggests medical uses for it such as anesthesia (1:35-49; 11; 3). Carl Koller, a friend of Freud, demonstrates cocaine's usefulness as an anesthetic in eye surgery (4). Dr. W.S. Halstead of New York injects cocaine into a nerve trunk obtaining anesthesia in all areas served by the trunk; he himself becomes habituated (1:46-8).

CHRONOLOGY (Cont'd)

		Cocaine is praised by physicians as a wonder drug; it is advocated for a wide variety of medical problems as well as for use in tonics and stimulant drinks, it is regularly prescribed for treatment of morphine, opium and alcohol addiction. Exploited by patent medicine manufacturers, its use for pleasure grows fast. Seemingly the perfect drug for the "industrious" Americans, the "Great Cocaine Explosion" lasts for twenty years, 1885-1905 (1:43-6, 69; 4:322; 5:). Pharmacetical companies make cocaine hydrochloride widely available, and the sniffing as well as intravenous injection of it spreads from the cultured and professional classes to the less wealthy. Sniffing is preferred since it leaves no needle marks and is discreet (21:9).
1885-87	FREUD ATTACKED	Freud is attacked by addiction specialists over his claim that cocaine is useful in aiding withdrawal from morphine. He is accused of releasing the "third scourge of mankind" (1:74-6).
1885		Robert Lewis Stevenson writes The Strange Case of Dr. Jekyll and Mr. Hyde, possibly with the help of and in reference to cocaine (18:27).
1885-86	COCA-COLA	In 1885, John Styth Pemberton of Georgia introduces *French Wine Cola: Ideal Nerve and Tonic Stimulant* to compete with Vin Mariani. In 1886, he invents Coca-Cola, a soft drink made from a syrup based on coca and caffeine (1:59-60).
1886	POPULARIZATION	Sir Arthur Conan Doyle has Sherlock Holmes use cocaine in, "A Scandal in Bohemia." Although he confuses its effects with morphine, he helps to popularize it. Dr. W.A. Hammond, a leader of the American medical profession, endorses the virtues of cocaine use (3:31-2; 16).
1887+	USE SPREADS	Increasingly, "lower classes," particularly in dry states, use cocaine in place of hard liquor; bars begin to add a pinch of cocaine in a shot of whiskey, and cocaine is peddled from door to door. State and local ordinances begin to be passed to regulate its use and distribution (2:8; 1:93).
1887	LOCAL REGULATIONS	Oregon prohibits the sale of opium and cocaine, marking the beginning of the passage of numerous state and local ordinances to regulate its use and distribution, particularly in the West (1:90-93; 8:656). (The first state to regulate drug distribution and use was Nevada, in 1877.)
1890	CONCERN GROWS	Medical circles become aware of the dangers of cocaine use (19:275). More and more reports of the failure of cocaine to cure opiate or alcohol addiction appear as the abuse potential becomes more obvious. In 1891, 200 cases of cocaine intoxication and death from cocaine poisoning are reported (1:75).
1892	COCA-COLA	The Coca-Cola company is formed; the soda is advertised as a headache remedy and a "tonic for elderly people who were easily tired." Widely successful, it is called "dope" in slang. The "Age of Cocainized Nostrums" begins (7:160; 18:27-8).
c. 1898	RACIAL FEARS	Articles begin to appear expressing concerns over the use of cocaine by blacks, the poor, and criminals. In 1900, a JAMA editorial emphasizes that black laborers in some parts of the

CHRONOLOGY (Cont'd)

		South are regularly using cocaine to combat fatigue. The South, in the last stages of the often violent dismantling of the remnants of Reconstruction, become increasingly fearful that cocaine-crazed blacks would rebel against the new segregated order (1:82; 2:6). Little evidence, however, supports the contention that blacks are using cocaine to any significant extent (9:9-11; 2:8; 19:16).
1901		Mortimer publishes Peru: History of Coca, summing up the favorable medical opinion.
1902	NONMEDICAL USE	Survey shows that only 3-8 percent of cocaine sold in New York, Boston, and other metropolitan areas goes into practice of medicine or dentistry (7:160).
1903	COCA-COLA DECOCAINIZED	Coca-Cola becomes one of the chief targets of Dr. Harvey Wiley's efforts to have the Pure Food and Drug Act enacted, but the cocaine is taken out of Coca-Cola under pressure from Southern politicians who are concerned over its use by blacks.
1904-06	IMPORTS RISE	The importation of coca rises dramatically; Americans consume as much in 1906 as in 1976, with half the population (1:64).
1906	FOOD AND DRUG ACT	The Pure Food and Drug Act's labeling regulations effectively eliminate cocaine from most patent medicines and soft drinks, and marks the beginning of the end for the free and easy distribution of cocaine. In order to import cocaine, the importer has to swear that the drug is not intended for use in a manner dangerous to health, but sanctions are not severe (8:560).
1907	USE PEAKS	Unemployment rises; cocaine use peaks; 1.5 million pounds of coca leaves enter the country (9:10-11). New York passes the Smith Anti-Cocaine Bill; while legal cocaine sells for 10 cents a gram, street dealers begin to sell illicit cocaine for $5.00 a gram (1:104).
1908	USE DECLINES	Importation of coca leaves drops to half the 1907 level and continues to decline (9:11). The New York Times reports that "the best thing for the cocaine fiend is to let him die" and that cocaine contains "the most insidious effects of any known drug" (1:80).
1910	USE PATTERNS	Continued decline in cocaine use is observed by many (9:10), but not by all (1:66). An article on the "Influence of Cocaine on Contemporary Style in Literature," argues cocaine is on the rise among intellectuals and that many great writers use it to "whip their inventiveness to action" (8:545).
	RACIAL FEARS EXPRESSED	Dr. Hamilton Wright, the U.S. Representative to the Shanghai Conference, reports that the use of cocaine by Southern blacks "is one of the most elusive and troublesome questions which confront the enforcement of the law" and is "often the direct incentive to the crime of rape." He emphasizes that the misuse of cocaine, particularly by blacks, is the most threatening habit in the country (9:9-10; 12:49-50).
1914	LOCAL REGULATION	By 1914, prior to the passage of the Harrison Act, 46 states have passed laws to regulate the use and distribution of cocaine; only 29 pass such laws for opiates. In many cases, the laws against cocaine use are more stringent than those for any other drug (1:91-3). The difficulties in dealing with the

CHRONOLOGY (Cont'd)

		interstate control of cocaine makes this problem a particularly important impetus to the passage of the Harrison Act (2:6).
	HARRISON ACT	The Harrison Act treats cocaine as an especially dangerous drug, classifying it incorrectly as a narcotic. It provides for a complete ban on cocaine whereas preparations containing small amounts of opiates are exempt. Cocaine use goes underground, where it is used by bohemians and musicians; even though it is harder to get and prices are high, cocaine use continues. Technically a revenue statute, the act does not directly prohibit the possession or use of cocaine.
	RACIAL/CRIME FEARS	Edward Huntington Williams gives evidence that blacks turned to cocaine when most of the states passed legislation which effectively barred them from access to alcohol; Williams also helps popularize the fears over the links between black crime and cocaine use (1:84). At the same time, another report calls into question the widespread use of cocaine by blacks, finding that only 2 out of 2,100 hospitalized blacks had used cocaine even once. The report concludes that poverty prevents a drug problem among blacks equal to that among whites (13:701-2; 2:8; 9:9).
1914-16		Little hard evidence exists to show precisely who has used cocaine during the first years after the Harrison Act is enacted (1:104).
1919	CONTROLS TIGHTENED	The Harrison Act is amended to provide tighter controls on cocaine and opium: the special registration tax is increased and a new commodity tax of one cent per ounce is leveled on all opium, coca leaves, or their derivatives. It thus becomes illegal to purchase, sell or dispense cocaine except in or from the original stamped package (8:563).
1920s	LIMITED USE CONTINUES	By the 1920s, illicit cocaine has risen to $30 an ounce, or three times what it had been a decade earlier. Cocaine use is restricted almost exclusively to the bohemian-jazz culture and the ghetto, where it becomes a symbol of affluence (6:418-19; 1:105).
1922	CONTROLS TIGHTENED	The Narcotic Drugs Import and Export Act of 1914 is amended. Cocaine importation is prohibited and penalties for violations become the most stringent yet, although it is still legal to import coca leaves, manufacture cocaine from them, or produce it synthetically. For the first time, cocaine is clearly classified as a narcotic drug (1:91-2; 8:563).
1926	CRIMINAL ASSOCIATION	The New York Times reports that the police find that criminals favor cocaine to stimulate their "courage" (1:72, 235 n. 8).
1930s	USE DECLINES	Cocaine use goes underground until the 1960s. By 1931, every state has restricted the sale of cocaine; 36 have prohibited unauthorized possession. The Uniform State Narcotic Act of 1932 subsequently sets the pattern for state regulation of cocaine between 1932-1970.

COMMENTARIES

Cocaine's spread and its use by blacks -- Musto, American Disease (1974), pp. 6-7

> "Cocaine is a good example of a drug whose dangers became widely accepted although at first it was immensely popular. It was pure, cheap, and widely distributed; its advocates distrusted not only the opinions of their opponents but also their motivation. Cocaine users were so impressed by its euphoric properties that they were unable to evaluate the drug objectively...."
>
> "If cocaine was a spur to violence against whites in the South, as was generally believed by whites, then reaction against its users made sense. The fear of the cocainized black coincided with the peak of lynchings, legal segregation, and voting laws all designed to remove political and social power from him. Fear of cocaine might have contributed to the dread that the black would rise above 'his place,' as well as reflecting the extent to which cocaine may have released defiance and retribution. So far, evidence does not suggest that cocaine caused a crime wave but rather that anticipation of black rebellion inspired white alarm. Anecdotes often told of super-human strength, cunning, and efficiency resulting from cocaine. One of the most terrifying beliefs about cocaine was that it actually improved pistol marksmanship. Another myth, that cocaine made blacks almost unaffected by mere .32 caliber bullets, is said to have caused southern police departments to switch to .38 caliber revolvers. These fantasies characterized white fear, not the reality of cocaine's effects, and gave one more reason for the repression of blacks."

Blacks, cocaine, and opium, 1905-1920 -- Helmer and Vietorisz, Drug Use, the Labor Market, and Class Conflict (1974), pp. 10-13

> "In 1909, few officials regarded the use of cocaine as either an especially black problem, or after 1909, as serious as the problem of heroin use, which began to develop at that time. Why then did Wright insist on declaring that 'the misuse of cocaine is...the most threatening of the drug habits that has ever appeared in this country' and that the principal carriers of the threat were black?
>
> "Fragmentary evidence indicates that blacks tended to use patent medicines more than whites in general. This reflected relatively high mortality rates for influenza and bronchial influenze....
>
> "It is also possible that Prohibition may have been at work stimulating cocaine use (and other narcotics) in the South. Between 1880 and 1910, Prohibition had spread from state to state, most rapidly and extensively in the South, and there were press reports at the time claiming that one of its effects had been to increase the substitution of drugs for liquor. On the other hand, black consumption of alcohol was far less than that of whites, so that Prohibition was less meaningful to them, and even at the price Wright quotes for cocaine in 1910--25¢ a grain--few blacks working as sharecroppers or as laborers could have afforded it regularly and still have eaten and paid the rent.
>
> "The plain fact is that Wright, the chief authority for the claim of a black cocaine problem, and later the virtual author of the Harrison Bill legislation to ban it, was reporting unsubstantiated gossip and quite dishonestly misrepresented the evidence before him. Cocaine reached a peak in 1907 and went sharply down thereafter....
>
> "We learn something about the ideology of narcotics from this. For just as it was pure invention that Bolshevik agitators had led blacks to riot during 1919, so it was invention of the same kind that at the beginning of the decade cocaine had been 'a potent incentive in driving humble negroes all over the country to abnormal crimes (Wright, 1910:51).' Both functioned as myths to explain why it would happen that otherwise docile, passive (humble--Wright's term for inferior) black people would riot against impoverished conditions in which they were confined.
>
> "In the period just considered, this condition, along with the condition of the entire working class, experienced several fluctuations, each of them paralleled by evidence or claims of a new drug problem. Unemployment, for example, rose sharply between 1907 and 1908 (the peak of the cocaine problem), between 1913 and 1914 (the onset of a heroin problem), and again between 1919 and 1921."

COMMENTARIES (Cont'd)

Cocaine use by blacks -- Ashley, Cocaine (1976), pp. 81-82.

> "Blacks *did* use cocaine. Like everyone else in the country they used patent medicines and some found they preferred the ones based on cocaine to those built on the opiates. Moreover, plantation overseers and gang bosses, like the Spaniards with the Incas, had discovered that things went better with coke. They kept a supply on hand and passed it out to the workers. As a means of keeping the hands happy and insuring more productivity, it was both efficient and cheap. A shrewd boss doling out one-quarter gram a day per man could keep sixteen workers happy and more productive for a full seven days on a single ounce. With cocaine selling at $2.50 the ounce, he could hardly go wrong. And Southern blacks also bought cocaine on their own. Some historians believe the blacks of the South turned to cocaine when most of the states states passed legislation which effectively barred them from access to alcohol. Some undoubtedly did get into cocaine in this way, but the majority began buying cocaine for the same reason as their white counterparts--they liked it.

The ban against cocaine -- Ashley, Cocaine (1976), pp. 89-90.

> "All the elements needed to insure cocaine's outlaw status were present by the first years of the twentieth century: it had become widely used as a pleasure drug, and doctors warned of the dangers attendant on indiscriminate sale and use; it had become identified with despised or poorly regarded groups--blacks, lower-class whites, and criminals; it had not been long enough established in the culture to insure its survival; and it had not, though used by them, become identified with the elite, thus losing what little chance it had of weathering the storm of criticism. Such statements as 'there is little doubt that every Jew peddler in the South carries the stuff,' printed in the prestigious *New York Times* were hardly calculated to lessen the demands that cocaine be banned.
>
> "With so much going against it, it is not surprising that cocaine was virtually outlawed in America several years before morphine and heroin, drugs which, though used by all classes of society, were more identified with the affluent than the poor. But one opiate, opium, was identified with a despised group; and...just as the medical profession rarely acknowledges the harmful effects of certain drugs until a significant level of pleasure use has been attained, the government rarely enacts restrictive legislation until a drug is identified with racial minorities or the poor."

The special fear of cocaine -- McLaughlin, Cocaine: The history and regulation of a dangerous drug, Cornell Law Review (1973), p. 568.

> "This analysis of early federal and state cocaine laws reflects the widespread fear of cocaine at the time of their enactment. Three observations support the argument that cocaine was, indeed, the most feared drug in this country prior to 1930. First, in terms of numbers, more states regulated cocaine than the opiates. In 1914, forty-six states had enacted some form of cocaine controls, whereas only twenty-nine states had comparable controls for the opiates. Even as late as 1930, there were more states which regulated cocaine than the opiates. Second, harsher penalties were often provided for cocaine violations. For instance, in New York State in 1914, the illegal sale of cocaine was a violation of the penal law punishable as a felony. The illegal sale of opium or heroin was a violation of the public health law punishable as a misdemeanor. Third, many provisions of federal law seemed to treat cocaine as an 'especially dangerous drug.' For example, the Harrison Act exempted from its coverage preparations containing minimal amounts of opium. No such exemption, however, was available for a preparation containing cocaine, no matter how small the amount. This special fear of cocaine may also explain its puzzling classification as a narcotic drug in the 1922 amendments to the Narcotic Drugs Import and Export Act, a classification contradicting pharmacological evidence."

The End of an Era-- Peterson, History of cocaine, in Peterson and Stillman, eds., Cocaine:1977 (1977), pp. 28-29.

> "In view of the uncritical enthusiasm with which coca, cocaine and their products were initially embraced by some physicians and laymen, a reaction was probably inevitable. As

COMMENTARIES (Cont'd)

with more recent 'wonder drugs,' initial widespread acceptance was increasingly tempered by the recognition that cocaine had undesirable side effects and could pose a serious health hazard. While originally considered relatively safe, it became apparent that cocaine created dependence in susceptible individuals, and that toxic psychosis and death could result from heavy injudicious use....

"Another important factor in the restriction of cocaine use was a reaction to the excesses of the patent medicine era. One has only to peruse an early edition of a Sears, Roebuck catalog to realize that patent medicines promised cures to diseases that have yet to be conquered...and Sears was relatively conservative in its advertisements. It was becoming clear that some degree of government control was necessary to curtail the indiscriminate inclusion of opiates and cocaine in over-the-counter medicines and tonics.

"The beginning of the 20th century marked another important trend. American medicine, characterized by relatively lenient professional standards until that time, was coming of age. Prior to the 20th century, a medical degree was easily obtained, even in the best medical schools. While still in its infancy, the American Medical Association became increasingly concerned with establishing and maintaining higher standards of medical training and practice. Pharmacists were also becoming more professional. While it has been argued that physicians and pharmacists had an economic interest in curbing patent medicine sales (Ashley, 1975), ethical concern over the dangers of self-administration--including the use of dependency-producing proprietary medicines--was also a factor.

" 'Muckraking' writers and journalists, bent on social reform, included the patent medicine manufacturers in their targets, labeling them as irresponsible.

"One of the reprehensible factors in curbing the use of cocaine and of cocaine-containing preparations in the period from 1900 to 1920 was the spector raised by the mass media of cocaine-crazed blacks committing heinous crimes. Even such 'respectable' sources as the Journal of the American Medical Association published accounts of blacks becoming addicted to 'a new form of vice' and indulging in a 'coke drunk' (The cocain [sic] habit, JAMA, 1900). Articles in the popular press, including the New York Times were less restrained. They reported that cocaine resulted in mass murders by 'crazed (black) cocaine takers' whose marksmanship was markedly improved by the drug. It was also alleged that use of cocaine imparted 'temporary immunity to shock -- a resistance to the 'knock down' effects of fatal wounds.' The drug was accused of being a 'potent incentive to driving the humbler negroes all over the country to abnormal crimes' (Williams, 1914 in Ashley, 1975). The same article asserted that 'Most attacks upon white women of the South...are the direct result of coke-crazed negro brain.' Whatever the incidence of cocaine use among convicted felons--and an examination of objective evidence suggests there was little--myths of this type were potent in swaying public opinion."

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34

Cannabis (Marihuana)
United States
1900-1944

BACKGROUND

Hemp cultivation for fiber was well established in the New World long before its intoxicant properties were known--as early as 1611 in Jamestown. By the mid-19th century, it was generally used in American medical practice for a wide range of conditions, particularly spastic conditions, headaches, and child labor pains. Over 100 articles recommending cannabis use were published in medical journals between 1840 and 1900, and in 1870 it was included in the U.S. Pharmacopoeia (1:4). But despite such ready availability, with the primary exception of Fitz Hugh Ludlow (The Hasheesh Eater, 1851), there is little evidence of the use of cannabis for intoxicating purposes. After the Civil War, its recreational use remained limited and was not conceived as a problem; an article in Scientific America of 1869 simply concluded that cannabis was "doubtless" used "to a limited extent" in the U.S. for its intoxicating properties (3:407; 2:216). In 1895 the English Indian Hemp Drugs Commission even reported that in regard to physical effect, "the moderate use of hemp drugs is practically attended by no evil results at all" (18:263).

The practice of smoking marihuana began in the United States around 1900 along the Mexican border, and appeared a decade later on the Gulf coast. During the 1920's the practice began to spread north and west from the border, carried by immigrant Mexicans and, separately, north and east from New Orleans, where the drug required a reputation as a narcotic, enslaver of youth and crime inducer (1). Between 1914 and 1931 in every state where the drug was used there were growing concerns over the "marihuana menace" and criminal prohititions against the "narcotic" appeared. But it remained a localized problem and narcotics experts resisted initial congressional efforts to enact federal legislation, in part because of apprehensions about its constitutionality. Instead, the FBN advocated the passage of the Uniform State Narcotic Drug Act and the incorporation within it of marihuana controls. By 1934, however, the FBN had begun to utilize fears over marihuana "addiction" to gain support of this act and in 1937 the national Marihuana Tax Act established a prohibitive tax and regulatory procedures pertaining to its use. Still debated are the extent of the popular fear of marihuana, the reasons for it and the role of FBN and its Commissioner Harry Anslinger in the passage of the act. There is little question, however, that antagonism toward Mexican laborers during the tense depression years played a significant role.

CHRONOLOGY

1900-10	INTRODUCTION	Marihuana smoking appears in towns along the Mexican border among immigrant Mexican laborers and soon spreads among Gulf coast black laborers and criminals; tales of its destructive effects begin to circulate (1:32 ff.).
1906	REGULATION	The Pure Food and Drug Act requires any quantity of cannabis, and several other dangerous substances, to be clearly marked on the label of any drug or food sold to the public.
1914	HARRISON ACT	Marihuana is not included with opiates and cocaine in the Harrison Act, although it was included in early drafts of the act.
1914-31	LOCAL BANS	El Paso, Texas, passes an ordinance banning its sale and possession, inaugurating the local phase of marihuana prohibition; 29 states, 17 west of the Mississippi, prohibit its use for nonmedical purposes, classifying it as a narcotic (1:34).

CHRONOLOGY (Cont'd)

1915	IMPORT BAN	In an extension of the Pure Food and Drug Act, the importation of cannabis is prohibited except for medical use. The ban, a direct response to pleas from Texas, is totally ineffective (1:37, 53 ff.). The earliest prohibitions in the West are adopted by California and Utah; still, there is no nationwide political interest in the inclusion of marihuana in the basic federal narcotics legislation (1:53, 60; 2:216).
1917	LINKED TO VIOLENCE	A police chief claims that those addicted to its use become very violent (1:34).
1919	LINKED TO VIOLENCE; LOCAL PROHIBITIONS	Federal officials report marihuana is the cause of violence among Mexican prisoners in Southwest states; around the same time, Dr. Oscar Dowling, president of Louisiana's Board of Health, argues cannabis ought to be controlled (2:218-9). Texas enacts a general marihuana statute modeled after the Harrison Act, but does not prohibit possession or use, reflecting the continued concern over the constitutionality of interfering with private conduct (1:37-38).
1920	CULTIVATION	U.S. Department of Agriculture publishes a pamphlet urging Americans to grow cannabis as a profitable undertaking.
1920s	LIMITED CONCERN	Following World War I, domestic fears of marihuana increase in the Southwest; there is a rapid increase in Mexican immigration as the economy booms, and use spreads among lower-class whites. The association between marihuana, Mexicans, and crimes and lawlessness becomes intense in these areas; Mexicans are believed to be incited to violence by smoking it. The Southwest calls for federal action, but the fear of marihuana in general in the U.S. is still minimal. The government's troubles in enforcing the Harrison Act also discourage any policing of more drugs; the situation is viewed as a state problem (2:219-20). Concern grows particularly intense in New Orleans where it is blamed for the rising crime rate (1:68).
	ALCOHOL PROHIBITION	With Prohibition, a substantial commercial trade in marihuana for recreational use develops for the first time; marihuana "tea pads" appear in New York (3:410).
1922	CONCERN OVER PANAMA	Concern grows over regular cannabis smoking among U.S. troops stationed in the Panama Canal Zone.
1925	PANAMA REPORT	The Panama Canal Zone Report concludes that "there is no evidence that marihuana, as grown and used [in the Canal Zone] is a 'habit-forming' drug in the sense in which the term is applied to alcohol, opium, cocaine, etc., or that it has any appreciably deleterious influence on the individuals using it." The report recommends that no action be taken to prevent its use or sale in the Zone (1:134).
1925-30	CONCERN STILL LIMITED	Officials are relatively lax in enforcement of existing local laws against marihuana use because they are more concerned with alcohol; the price of marihuana remains relatively low (3:437-8). Reports associating horrible crimes, marihuana, and Mexicans continue, but overall there is still little notice taken of its use.

CHRONOLOGY (Cont'd)

1929	CONCERN GROWS	Congressional interest in marihuana increases under local pressure and international indictments; for the first time in federal legislation, marihuana is classified with the narcotics. The Surgeon General issues a Preliminary Report on Indian Hemp and Peyote, concluding that marihuana is "definitely a narcotic" and giving credence to popular notions it is addictive, criminogenic, and insanity-producing (1:56-60).
1926	NEW ORLEANS	Use among blacks and lower class whites is reported in New Orleans, particularly among youths.
1930	FBN	The Federal Bureau of Narcotics is established under Henry J. Anslinger; apprehension about the constitutionality of federal action and pressure from the pharmaceutical industry deters any interest in federal legislation; the FBN concentrates on drafting a Uniform State Narcotic Act (1:118).
1930s	RACIAL CONFLICT; DEPRESSION	By the early 30s, still only 16 states have laws prohibiting the use of marihuana. As the Great Depression begins, Mexicans become an unwelcome surplus in regions devastated by unemployment during the Depression. Southwest police and attorneys protest to the federal government about the Mexicans' use of marihuana (2:220). Racial conflict develops in two areas: (1) rural conflict between Mexican farm labor and farmers and growers; and (2) urban conflict (mostly in Los Angeles) between Mexicans and Anglo members of the working class. The conflict is particularly bitter in Los Angeles, as the surplus of labor in California in 1930 is one of the largest in the state's history (4:23). (American Federation of Labor, farmers, the American Legion, and nativist organizations come out against Mexican immigration.)
1931	LINKED TO CRIME	The marihuana-crime thesis is receiving "concerted attention" by law enforcement officials in New Orleans, Denver, and other cities with a significant incidence of marihuana smoking; rising crime rates become attributed to the effects of the "killer weed" (1:145); in October, Anslinger declares that instances of criminals using the drug to give them courage "before making brutal forays" are well known to the FBN (1:77). Los Angeles begins a program of massive repatriation of Mexicans (4:25).
1932	CONCERN LIMITED; UNIFORM STATE NARCOTIC ACT	The annual FBN report acknowledges marihuana use "wherever there are settlements of Latin Americans," but that publicity may have exaggerated the extent of the evil, which may not be inordinately large. Control measures are necessary to prohibit nonmedical trafficking, but control is best left to the states (6:128; 2:221). The FBN strongly endorses the Uniform State Narcotic Drug Act, which contains an optional provision for including marihuana as a narcotic drug. It is stressed that the marihuana problem could be brought under control if all states adopted it. At first the act does not fare well in the state legislatures (2:221).
1933	PANAMA REPORT	Second report on marihuana smoking in the Panama Canal Zone affirms the 1925 report and advises against any prevention of its sale or use; the report is labeled confidential (1:138).

CHRONOLOGY (Cont'd)

1934	CONCERN GROWS: FBN POSITION SHIFTS	Greater concern spreads through the U.S. in general, although it is difficult to determine whether use is increasing (1:92). Dr. Walter Bromberg reports at a meeting of the American Psychiatric Association that one out of four people in Southern states may be a marihuana smoker and that the possible use of marihuana was spreading from the South to New York and other cities (2:220). FBN strategy begins to change; faced with local resistance to the USNDA, in late 1934, Anslinger emphasizes the need for states to adopt USNDA to control marihuana, "the worst evil of all" (1:97-98).
1935	CONCERN CONTINUES	In January, the first articles on marihuana are listed in the Reader's Guide to Periodical Literature after a decade of silence (6:141). In September, it is observed that marihuana is perhaps now the most "insidious of our narcotics" and is a direct by-product of unrestricted Mexican immigration. Increasing attention is brought by FBN reports on marihuana-associated crime, but the Bureau still continues to recommend uniform state acts, asserting that the problem is concentrated in the Southwest and is only a minor problem even there (2:220-22; 4:21).
1936	FBN SUPPORTS FEDERAL LEGISLATION	Late in the year, under increasing pressure from the Southwest, the FBN decides to support federal legislation (1:120, 150; 2:222). Commissioner Anslinger begins holding conferences to that end, hinting that federal intervention might be necessary if there is not more activity from the states (6:139). The FBN's annual report, Traffic in Opium and Other Drugs, begins to include a section on "Marihuana Crimes," describing brutal murders and violent attacks as evidence of the drug's debasing and homicidal effects.
1937, January	ANSLINGER	Anslinger still maintains marihuana is an intrastate problem and that the best hope for its control lies in uniform state laws (2:222).
1937, July	ANSLINGER	Anslinger publishes Marihuana: Assassin of Youth, concluding "How many murders, suicides, robberies, criminal assaults, hold-ups, burglaries, and deeds of maniacal insanity it [marihuana] causes each year, especially among the young, can only be conjectured" (14;18).
1937, July- 1939, June	USE ATTACKED	Seventeen articles attacking marihuana are indexed in the Reader's Guide (6:141).
1937, August	TAX ACT	The Federal Marihuana Tax Act is passed with hardly any debate. The act stipulates that all manufacturers, importers, dealers, and practitioners register and pay a special prohibitive tax, and establishes a tax on all transfers. The law is carefully kept separate as a revenue act from the Harrison Act to discourage court attack (2:10).
1938	LIMITED ARRESTS BEGIN	FBN agents begin to arrest marihuana users whom they had formerly either ignored or turned over to state authorities; however, the focus remains on the greater danger of heroin, and if agents are found making excessive arrests of marihuana possession, they are told to get back to "the hard stuff" 91:180; 2:223). Enforcement continues to lie with local police, aided occasionally by FBN agents; publicity campaigns claiming the menace is out of hand are stopped by the Bureau as

CHRONOLOGY (Cont'd)

		alarmist, Anslinger believing the problem is under control throughout most of the nation (2:228).
1941	CONCERN DECLINES	The U.S. enters World War II and enforcement and interest in marihuana decline (1:181).
1943	TAX ACT ATTACKED	Colonel J.M. Phalen, editor of the Military Surgeon, writes an editorial entitled "The Marijuana Bugaboo" in response to written inquiries about soldiers using marihuana in Panama: "The smoking of the leaves, flowers, and seeds of Cannabis sativa is no more harmful than the smoking of tobacco...The legislation in relation to marihuana was ill-advised...it branded as a menace and crime a matter of trivial importance.... It is hoped that no witch hunt will be instituted in the military service over a problem that does not exist" (16:234).
1944	LA GUARDIA REPORT	Thirty-one eminent physicians, psychiatrists, clinical psychologists, pharmacologists, chemists and sociologists report to Mayor La Guardia on the marihuana problem in New York City. Stressing the relative triviality of the effects of the drug, the report is strongly attacked, even by an editorial in JAMA (17; 15:234 ff; 15:150-52).

COMMENTARIES

Federal marihuana legislation and the issue of constitutionality -- Bonnie and Whitebread, Marihuana Conviction (1974), pp. 118-121:

> "Apprehensions about the constitutionality of federal action and the political influence of the pharmaceutical industry deterred the FBN from seeking federal legislation in 1930 and 1931. The bureau chose to concentrate its energies instead on securing adoption of the Uniform Act, including the cannabis provision, by the state legislatures. Even so, however, Commissioner Anslinger had not ruled out federal legislation 'at the appropriate time.'
>
> "The hesitation of the federal policy makers was not motivated either by philosophical objection or scientific uncertainty. For Anslinger and his colleagues, there was no philosophic issue. Criminal legislation was needed simply because 'Indian hemp is used in certain sections for improper purposes, that is to say, for nonmedical purposes....
>
> "Commissioner Anslinger's decision to deflect proposals for a federal law was based instead in bureaucratic considerations--in a desire to protect the FBN's jurisdiction under the Harrison Act. His attitude is reflected in his responses to politicians who urged federal action from 1932 through 1934. Opposing a bill (introduced in 1933) of Congressman Fish of New York to amend the Harrison Act, Anslinger, for example, noted that federal action should be deferred until all the states had acted. A memo from Tennyson, from which Anslinger drew his response, also warned of the possible opposition of 'one or two pharmaceutical houses.' Meanwhile, however, all FBN agents were directed to refer 'all complaints concerning marihuana to [Anslinger] with perhaps the possibility in view of effecting some federal laws at some future data.
>
> "...There were two constitutional problems with 'regulating' marihuana by use of the taxing power, which Congress had used in the Harrison Act to regulate the opiates and cocaine. First, because the drugs covered by the Harrison Act were almost exclusively imported, the constitutional objection that Congress was regulating production, a local activity, was not germane; instead the main constitutional difficulty under the Harrison Act was that Congress was regulating the medical profession. Marihuana, however, was growing widely as a roadside weed or in gardens or fields all over the country; under these circumstances, effective control would require intensive regulation and/or the prohibition of production, either of which would go well beyond the Harrison Act. The taxing power might not suffice as a shield in this case.
>
> "Second, legitimate production of marihuana for medical purposes was decreasing, and the cost of controlling illegitimate growth under the Harrison scheme would far exceed the revenue which might be derived. In such event--a net loss to the government--the court would not be

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> likely to accept Congress' word that it was exercising the taxing power and probably would not close its eyes to Congress' real motive. Of course, a more limited taxing scheme could be devised, as could schemes simply controlling interstate and foreign commercial activity; but these would not substantially affect the marihuana evil, which required tight control over cultivation and possession. For this reason, Anslinger advised Gibbons that 'under the taxing power and regulation of interstate commerce, it would be almost hopeless to expect any kind of adequate control.'"

The FBN and marihuana -- Dickson, Bureaucracy and morality, Social Problems (1968), pp. 152-155.

> "The Bureau's efforts to induce passage of the Marihuana Tax Act deserve special mention, however, in light of Becker's finding that the legislation was the result of what he terms a 'moral enterprise.' Becker concludes that Narcotics Commissioner Anslinger and his Bureau were the motive forces behind the original 1937 legislation and the increasingly severe penalties which have since been imposed. This is readily conceded. But he argues that the motivation behind this desire for marihuana legislation was a moral one. He presents a picture of a society totally indifferent to the use of marihuana until Anslinger, in the role of a moral entrepreneur, 'blows the whistle' on marihuana smoking....What Becker ignores is that Anslinger was also a bureaucrat and thus responsive to bureaucratic pressures and demands as well. The distinction between these roles is difficult to make but it is fundamental in analyzing the legislation.
>
> "...While Becker seems to argue that the Bureau generated a great public outcry against marihuana use prior to the passage of the Act, his data supporting this argument are misleading if not erroneously interpreted. While marihuana use seems to have increased since the early 1930's, there appears to have been little public concern expressed in the news media, even in 1937....In short, rather than the Bureau-generated public turmoil that Becker indicates, it seems that public awareness of the problem, as well as public opposition to it, was slight...."
>
> "...For Anslinger, the moral entrepreneur, 1936 should have been a year of victory. In every state the marihuana menace was subjected to statutory control. But for Anslinger, the bureaucrat, 1936 seems to have been another year of defeat. His budgetary appropriation remained near a low point that had not been seen in over a decade, which to some extent reflected the general economic conditions of the time....
>
> "Again in 1937 Anslinger, the moralist, would be expected first to convince the general public that marihuana use was evil and immoral, while Anslinger, the bureaucrat, would be more concerned with attaining passage of legislation which would increase the Bureau's powers and then proceed to generate environmental support for these powers. In fact, the latter occurred. The great bulk of Bureau-inspired publicity came after the passage of the Act, not before.
>
> "Faced with a steadily decreasing budget, the Bureau responded as any organization so threatened might react: it tried to appear more necessary, and it tried to increase its scope of operations. As a result of this response, the Marihuana Tax Act of 1937 was passed."

The FBN and marihuana -- Galliner and Walker, The puzzle of the social origins of the Marihuana Tax Act of 1937, Social Problems (1977), pp. 374-375.

> The cause of the activities of Anslinger and the Bureau is difficult to assess with the information available. Yet some analysis of the causes of Anslinger's behavior and that of his subordinates is possible. Anslinger's documented behavior was usual enough, and not that of a zealous moral crusader or power-hungry bureaucrat. It is probable that the Bureau compaign to secure uniform state drug laws had some influence on later definitions of marihuana, but this does not support the claim of a FBN propaganda effort to secure passage of the Marihuana Tax Act of 1937. Superficially, this legislation seems unnecessary. Long before the campaign got underway, many states had laws prohibiting sale and possession of marihuana, and prior to the first federal hearings, all states had such laws. There is insufficient evidence to demonstrate a national or local marihuana crisis just prior to the bill's passage. The symbolic properties of the Marihuana Tax Act are also of great importance. Without new funding, this law clearly could not be fully implemented. It was largely a technical adjustment in federal law, duplicating existing state laws--not the

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important legal change implied by Becker, Dickson, Reasons, Lindesmith, and Bonnie and Whitebread. As Edelman suggests, the political behavior of people is determined by whether a piece of legislation symbolically reassures them.

It may be that pressure from law enforcement officials in the Southwest was an initial precipitating agent in the bill's passage; however, this pressure does not appear to reflect any Mexican marihuana panic in the Southwest, and the bill's clear sailing in Congress cannot be accounted for solely by this political pressure. The bill was not objectionable to most, both because it supported widespread commonsense opinion of the time and because it was purely symbolic legislation. No Congressmen demanded increased appropriation to fund marihuana control. It appears that Congress was not very concerned with the problem because it recognized the public relations or symbolic nature of the act."

The Role of the Federal Bureau of Narcotics -- Bonnie and Whitehead, Marihuana Conviction (1974), pp. 94-98, 174.

"Critics of existing marihuana legislation have frequently attributed the illegal status of marihuana solely to the crusading zeal of the Federal Bureau of Narcotics and especially of its long-time head, Harry J. Anslinger. Some observers have suggested that the bureau's activity was produced by bureaucratic exigencies and the need to expand; others have said the bureau was on a moral crusade; still others have asserted that the bureau believed its own propaganda about the link between criminality and marihuana. While each of these factors may have played some role, it is clear that the bureau did not single-handedly conjure up the idea of banning marihuana use. Since twenty-four states had already undertaken the prohibition of marihuana before the creation of the bureau in 1930, the bureau cannot alone be credited with the pressure to outlaw the drug.

"The bureau did, however, play a pivotal part. Although Anslinger suffered a setback during the drafting of the Uniform Act, he set to work at once to secure its enactment by the states, including the optional marihuana provision. There can be little doubt that the bureau's activity hastened the passage of the act by state legislatures and increased public awareness of marihuana. The bureau's primary objective, of course, was adoption of the entire Uniform Act; of particular interest here is its activity regarding marihuana.

"Immediately after the commissioners approved the act, the bureau began a comprehensive campaign in the press, in legislative chambers, and in any other forum it could find to gain public support for the act's passage. Perceiving the absence of public awareness of marihuana and wanting to encourage positive action to overcome the drug's optional status, the bureau sought to arouse public interest in marihuana through 'an educational campaign describing the drug, its identifications and its evil effects.' That the FBN had a difficult task is illustrated by the fact that as late as 1936 it was necessary to show marihuana to the New York police so that they could recognize the growing plant and its dried, smokable form....

"Despite all these FBN efforts, the Uniform Act did not fare well in state legislatures at first. By 26 April 1933 only two states had enacted it in full. Twenty months later only seven additional states were in the fold....

"The combination of public apathy and administrative resistance dictated a new strategy. The bureau needed to arouse public interest so that the professional objections would seem inconsequential beside a 'felt need' of the legislatures. The 'marihuana menace' was an ideal concept for such a campaign. Thus, beginning in late 1934, Commissioner Anslinger gradually shifted the focus of the FBN's publicity campaign away from the inability of federal law enforcement agencies to deal effectively with local drug problems toward the need to cope with a new drug menace--marihuana.

"From 1932 through most of 1934 very little of the bureau's propaganda was directed toward the supplemental marihuana provision. But by late 1934 the Narcotics Bureau had begun to use the specter of widespread marihuana addiction as a means of calling attention to and gaining support for the Uniform Narcotic Drug Act. When Commissioner Anslinger was asked in 1934 what would be the best way of dealing with the marihuana problem, he replied: 'The confusion among the State's narcotic laws today is one of the greatest aids of the illicit traffic in every dangerous drug. It clogs all the machinery of detection, impedes all the processes of prevention and punishment. Put a Uniform State Narcotics Act through every legislature. That

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will not only cure the worst of the hashish evil; it will help reduce the whole drug evil to a minimum....

"In the new strategy Anslinger discarded his previous policy of not officially associating himself or the FBN with the coterie of propagandists on the marihuana issue. Instead, he too tried to popularize the issue through speeches and articles. Indicative of his efforts was 'Marihuana, Assassin of Youth' which appeared in the widely circulated American Magazine in July 1937. The FBN files contain over fifty letters addressed to the commissioner which say 'your article was the first time I ever heard of marihuana.'

"In addition to its own attempts to impress the public with the scope of the marihuana menace, the bureau stood ready to assist others in writing about the new evil, whether the intended product was factual reporting or literary fiction. Indeed, in the depression era when sensational journalism was a competitive necessity, it was very hard to tell the two apart" (pp. 94-98).

"The [Marihuana Tax Act] passed Congress with little debate and even less public attention. Although the Federal Bureau of Narcotics had not sought legislation, the bureau's efforts on behalf of the Uniform Narcotic Drug Act had created a climate of fear which provoked insistent cries for a federal remedy, particularly by a few state law enforcement agents hoping to get federal support for their activities. As a result, the law was tied neither to scientific study nor to enforcement need. The Marihuana Tax Act was hastily drawn, heard, debated, and passed. It was a paradigm of the uncontroversial law" (p. 174).

The marihuana problem -- Musto, Evolution of American narcotic controls, in Drug Use in America, App. III (1973), p. 344.

"The first major issue Commissioner Anslinger faced was beginning to appear even as he took office--a quickly burgeoning fear centered in the Southwest about a plant grown and used by Mexicans who had poured into the region as farm laborers in the prosperous 1920's....As the fear of marihuana grew, it was accused of stimulating violence and being slyly sold to American schoolchildren. In the early 1930's the FBN tried to minimize these fears and suggested that state laws were the appropriate response. The Uniform State Narcotic Drug Act proposed in 1932 included marihuana regulations as an option for state legislation, which the Bureau claimed was the solution. The plant grew in the United States, so the best response was local, not by an agency which the Bureau claimed was the solution. The plant grew in the United States, so the best response was local, not by an agency which had its eyes on the smuggling of drugs from Turkey, France, Bolivia, China and Siam.

"Yet the Treasury Department did decide to make marihuana use a federal offense, recalls Anslinger, more as a gesture, to the fearful Southwest than as a comprehensive and probably effective plan for marihuana control. The law was modeled on the National Firearms Act which was declared constitutional by the Supreme Court in March, 1937. In April, the Treasury representatives went before Congress to ask for a similar 'transfer tax' and licensing system for marihuana. Congress passed the Marihuana Tax Act of 1937 without dissent and by October it was in effect (75th Congress, Public Law No. 238). Opposition to the Act in committee came from an AMA representative, Dr. William C. Woodward, who stated that this was an area of state and not federal concern, and that it should not become one more example of federal encroachment on the medical profession.

"In the enforcement of the Act, the Bureau described marihuana as a fearful substance, but played down any suggestion that it was a problem out of control. The goal appears to have been to make the drug unattractive but not to create a panic over claims that it was widely disseminated to schoolchildren."

The FBN and marihuana -- Musto, American Disease, p. 229.

"Why the marihuana law was so eagerly desired by some and, when enacted, so effectively placating are fundamental questions. From the evidence examined, the FBN does not appear to have created the marihuana scare of the early 1930's. Such scapegoating offers no more than it did in the era when marihuana was blamed for almost any vicious crime. When viewed from the narrow goal of placating fears about an 'alien minority,' the Act was serviceable for more than a quarter of a century. For the broader significance of the marihuana law and an

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understanding of the dynamics involved in prohibitive legislation, the Tax Act must be placed in its cultural and institutional context."

Marihuana and Mexican-Americans -- Helmer, Drug Use, the Labor Market and Class Conflict (1974), pp. 23-25.

> "Marijuana was almost certainly in use among the Mexicans working on the farm at this time. It was as conventional to them as alcohol consumption was to Anglos; it was one of many customs brought from the peasant culture across the border. Yet during the 1920's almost no notice was taken of it in the Anglo communities in which they worked, in spite of a widespread belief in their criminality in other respects....
>
> "After 1930 the situation changed radically...
>
> "What threatened the farm interests a great deal more than marijuana use was incipient unionism among the farm workers, for this, of course, directly attacked the labor-capital relationship on which the economic position of the farm interests depended. Predictably, therefore, union agitation was a felony crime in California as was the so-called offense of preaching anarchism or bolshevism. These ideological catch-alls were designed to allow police to break up and arrest almost any number of Mexicans meeting together.
>
> "The union movement began to develop out of the Mexican mutual aid societies around 1928....
>
> "This had its effect on attitudes toward marijuana, as the farm interests sought legal means to attack the Mexican organizations without driving the labor force away altogether. The pressure for a Federal marijuana law thus reflected the state of industrial conflict which intensified through the early Depression years but which had not existed in the 1920's. Since marijuana was almost entirely consumed by the Mexican laborers, legislation against it was intended as legislation against them."
>
> "The problem of unemployment in general [in Los Angeles], and of Mexicans in particular, led to a variety of measures to help reduce the labor surplus and in effect cut the cost to the county authorities of maintaining an expanded relief program. Anti-union previsions, the vagrancy laws, the virtual suspension of *habeas corpus* and enforcement of the State Poison Act to deal with marijuana--these were the methods used. Finally, in 1931, the Los Angeles authorities discovered that shipping Mexicans across the border was a great deal cheaper than maintaining them on welfare, and so the plan, which was to result in massive repatriations across the country, was initiated.
>
> "This was more effective than the piecemeal efforts of the law enforcement agencies, but together they underscore the context in which the ideology of marijuana first developed. The situation was thus quite familiar in its general features to the opium and Chinese exclusion campaign of 50 years before. Then as here the use of a 'narcotic' drug was one among the many personal and social vices of the target group--Mexicans were lazy, dirty, promiscuous, violent, subintelligent, criminal, anarchistic, communist, and intoxicated with marijuana."

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